

Chemist & Druggist

Benn »

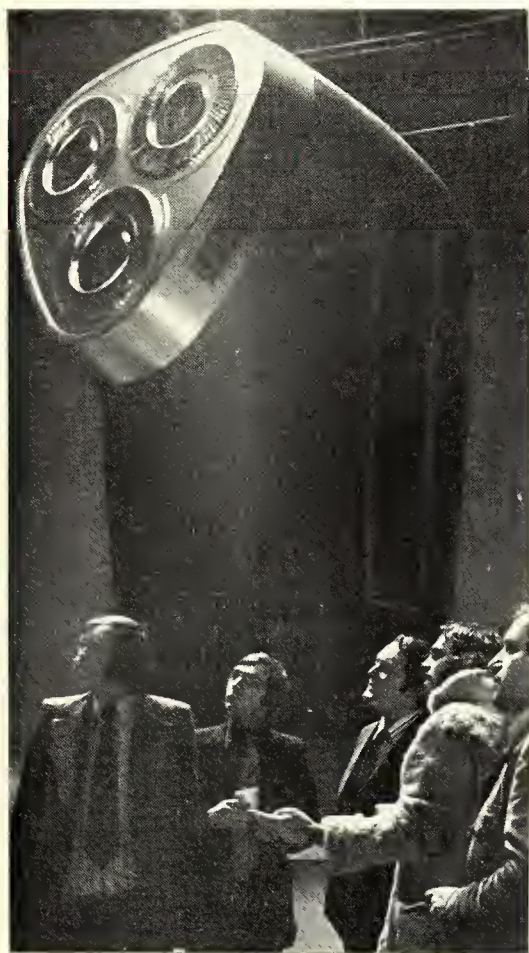
APRIL 17 1976 THE NEWSWEEKLY FOR PHARMACY

PHILIPS REPORT



PHILIPS

**We built the world's biggest shaver
to demonstrate what will be the
world's biggest seller.**



**A brand new TV commercial for the
brand new Philishave range.**

See the giant Philishave Electric Shaver on TV and in the National Press starting April 19.

Simply years ahead



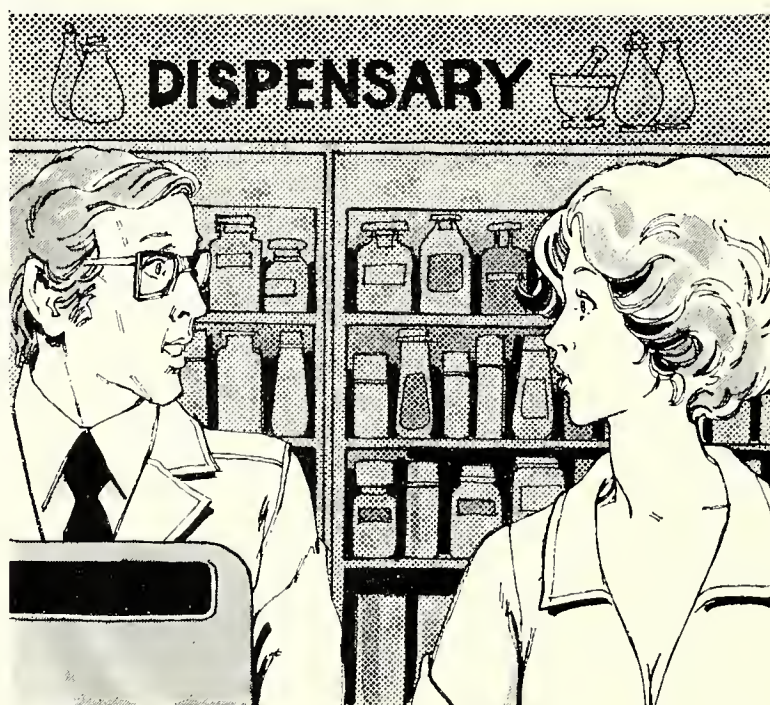
**Booklets to
boost PSNC
campaign**

**Students aim
to be 'group'
of Society**

**Management
institute
conference**

**Vestric sales
top £50m
in first half**

Are you getting into throwaway pantees?



More people than ever will be getting into Undercover throwaway pantees during 1976 and our consumer advertising campaign throughout the summer will convince you of its growing success.

The attractive, easy-on-the-shelf pack contains four

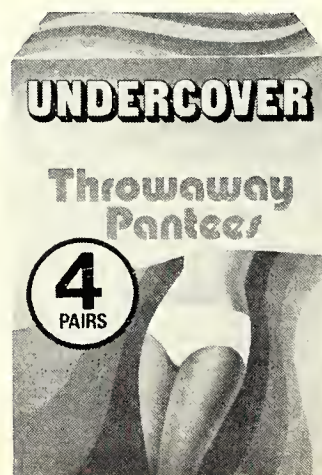
well-styled comfortable pantees specially designed for menstrual time and perfect for holidays.

Make sure of your share of this fast growing market by contacting your local wholesaler or direct from the manufacturers.

Undercover Products
(International) Ltd
Queensway Industrial Estate
Wrexham, N. Wales
Tel: (0978) 53535/6

Undercover
Throwaway Pantees

Wear today – gone tomorrow.



Some of our wholesalers:—

Sangers Ltd.
Unichem Ltd.
Vestric Ltd. (selected branches)
Benwall Enterprises Ltd.
Bleasdale Ltd.
Cory Brothers & Co Ltd.
D.R. Crosskill & Sons Ltd.
Richard Daniel & Son Ltd.
Dolphin Munday Sundries Ltd.
H.B. Dorling Ltd.
Eastern Wholesale Chemists Ltd.
James Hardcastle & Co. Ltd.
Hugh Reynolds Ltd.
L. Rowland & Co. Ltd.
A.V. Sorge Ltd.
Wholesale Sundries (Cheshire) Ltd.
F. Widocks & Co. Ltd.

Available in medium and large sizes.
Also Undercover for men.

Chemist & Druggist

The newsweekly for pharmacy

17 April 1976 Vol. 205 No. 5011

117th year of publication

Editor Arthur Wright, FPS, DBA

Advertisement Manager Peter Nicholls, JP

Publisher Arthur Wright, FPS, DBA

Contents

Comment <input type="checkbox"/> Student outlook <input type="checkbox"/> STV	551
6,000 booklets to boost contractors' campaign	552
State control report to be put to Labour Party's Executive	553
Guidance on new VAT rate	553
Boots reserve right to advertise medicines	554
The Xrayser column: Advertising	557
French pharmacists' fight against "mutualist" pharmacy	562
Students in call for own section of the Society	567
Management education of pharmacists	571
Health Services Bill allows for private dispensing	573
Vestric sales top £50m in first half	575
Imported vitamins up 7½ per cent in price	576
Appointments 575	New Products 559
Deaths 557	On TV Next Week 559
Coming Events 576	People 557
Company News 575	Prescription Specialities 559
Letters 572	Trade News 560
Market News 576	Classified Advertisements 557

Published Saturdays by Benn Brothers Ltd

25 New Street Square, London EC4A 3JA (01 353 3212)

Editorial and Advertisement Offices

25 New Street Square, London EC4A 3JA (01 353 3212)
Telex 27844

Regional Advertisement Offices

Midlands 240-244 Stratford Road, Shirley, Solihull, West

Midlands B90 3AE 021 744 4427

North East Permanent House, The Headrow, Leeds LS1 8DF
0532 452841

Scottish 74 Drymen Road, Bearsden, Glasgow 041 942 2315

North West 491 Chester Road, Old Trafford, Manchester

M16 9HF 061 872 5151

West Country and South Wales 10 Badminton Road, Downend,
Bristol BS16 6BQ 0272 564827

Subscription Department 125 High Street, Colliers Wood,
London SW19 2JN. Telephone 01 542 8575

Subscription Home and Overseas £22 per annum
50p per copy (postage extra)



Benn

Contents © Benn Brothers Ltd 1976. All rights reserved.
No part of this publication may be reproduced, stored in a
retrieval system or transmitted in any form or by any means, electronic,
mechanical, photocopying, recording or otherwise without the prior
permission of Benn Brothers Ltd.

Comment

Student outlook

The attendance at this year's conference of the British Pharmaceutical Students' Association (p567) was an encouraging sign of the next generation of pharmacists' interest in shaping its own future. However, the seasoned observer will note that the problems the young see facing them change little from generation to generation; only the proposed solutions change—and even they go in almost predictable cycles with the ever-rotating student population.

A case in point is the claim for the Association to become a student "group" within the Pharmaceutical Society. ("Not *another* membership group," did we hear someone remark?) The reason is basically money: the students wish the Society to relieve them of their financial burden, apparently finding the current per capita grant from the Society (amounting to about half the Association's income) insufficient.

With the cost of Society membership having recently doubled, Council must be right to refuse to provide the students with a horn of plenty. The present grant is "without strings", and previous BPSA conferences have jealously guarded the Association's autonomy and independence. Surely the 50p asked annually of BPSA members is a small price to pay for an effective voice—if the students choose to make it so.

BPSA has provided many of the profession's leaders over the years. They cut their teeth "fighting" the Society, and were no less part of the profession for not being under the Society's protective wing. We hope the organisation will retain its ambition to independence.

One speaker at the conference who made a marked impression on many delegates' opinion—as judged by reactions later—was Mr R. Worby, a member of the Pharmaceutical Services Negotiating Committee. Few people are better able to put across the general practice pharmacist's *professional* involvement in his local community, an involvement often not fully appreciated by the pharmacy student until he experiences it.

Students are in no doubt that they are acting as professionals when advising the doctor. But do all schools of pharmacy teach them enough of the professional skills required to advise the doctor's patient or the customer in the shop? The reaction to Mr Worby's paper suggests that general practice does not always receive the consideration it deserves as the majority sector of the profession. And regrettably many "academics" do not help in this matter.

STV

"A consequence of the single transferable vote is to achieve proportional representation of whatever is of importance to the electorate," claimed a working party of the Pharmaceutical Society's Council in 1974 when recommending adoption of STV in Council elections.

If the working party was right, this year's election—the first to use the system—should provide some answers in the numbers games being played between the various factions best known for their initials. But pity the elector. Is a vote for hospital also one for unions? A vote for employees one for general practice?

But perhaps there will be no answers, for in also drawing lots for candidates' order on the voting paper, Council forgot the scientific maxim: never change two variables in the same experiment!

6,000 booklets to boost contractors' campaign

The Pharmaceutical Services Negotiating Committee this week launched a "Prescriptions in peril" booklet to support a national campaign alerting the public to the growing number of pharmacy closures.

Some 6,000 copies of the booklet are to go to regional and area health authorities, family practitioner and local pharmaceutical committees, community health councils, women's institutes, townswomen's guilds and local amenity groups. The booklet explains reasons behind the 300 a year pharmacy closures, pointing out the inconvenience to the public which will result if the trend continues. It mentions the negotiations in progress with the Department of Health regarding the small pharmacies scheme and reiterates the Committee's view on health centres—that provision of pharmaceutical services should be considered immediately when a health centre scheme is first mooted and that there should be immediate control on any pharmacist wanting to open a shop within a quarter of a mile.

Unique role

Describing the pharmacist's "unique role in the community", the booklet explains that all pharmacists now do a three-year degree course plus a year's pre-registration training: "Regrettably in spite of his academic qualifications, the pharmacist is little recognised by the public as a professional man and they tend to look upon him as a specialist shopkeeper." But the public gained from his accessibility: "No other professional view can be obtained so easily or at so little cost as that of the professional pharmacist", who is available for long hours to advise on a wide range of health matters. Pharmacists also have a vital role to play in checking prescriptions and helping doctors to evaluate new drugs, says the booklet.

Other back-up

The booklets are to be sent out next week and will be backed by a series of speaking engagements starting in May, when members of the Committee will offer to give talks to interested groups. The Committee is also hoping to exert pressure on the Government by writing to MPs—members met Laurie Pavitt, MP, recently and hope to meet Mr Gerald Vaughan, MP, chairman of the Conservative Party's health committee, after Easter.

Mr Roger Braban, who is organising the public relations campaign for PSNC, was pleased with the good attendance of national Press at a conference on Tuesday to launch the booklet. Tuesday was also a successful day for radio publicity, with Committee members airing their views on three programmes—Mr David Sharpe was interviewed by London Broadcasting and on BBC's "PM reports"

and Mr R. Worby spoke on the "Jimmy Young show". Mr Braban told *C&D* that if there was a good response to the booklet the next step would be to produce another one aimed specifically towards the general public.

ASA looks into advertising of some pharmacy lines

Advertisements for a slimming aid, a ginseng preparation and some eye drops came under scrutiny from the Advertising Standards Authority in the first two months of this year.

The ASA's latest report gives details of complaints investigated during this period—four of the 164 cases were in the cosmetics, toiletry and pharmaceutical category. A complaint was upheld against English Grains Ltd on the basis that an advertisement contravened section V.8.13 of the Code of Advertising Practice that "no claim may be made in any advertisement which is based upon the inclusion in the advertised product of the herbal preparation ginseng." The advertiser gave an assurance that future advertisements would carry approved copy.

Another member of the public challenged the basis of Ayds as a slimming aid, but the complaint was not upheld when independent medical and phar-

maceutical support was submitted to ASA.

The mother of a teenage daughter maintained that the Eye Dew eye drops advertisement "Your mother will never know", depicting a young girl with key in hand, presumably coming home very late, was irresponsible and encouraged deception between children and parents. The complaint was upheld as the advertisement appearing in a magazine for 12-16 year olds was "irresponsible in concept."

Someone else queried a reference to Old Spice as "your favourite stick deodorant"—it was not true in his case. He also queried the use of "while stocks last" in a special offer. Although the advertising agency said the statement had been made in the belief that Old Spice was the largest selling range of men's toiletries in the UK, the complaint was upheld because the phrase "your favourite" implied "Britain's favourite", for which there was no substantiation. The stocks referred to were specially manufactured for the promotion and the advertiser wanted people to realise the offer only applied to a limited quantity.

Complaints not upheld were that an advertisement for Milton sterilising fluid encouraged bottle-feeding and that claims on the packaging for the duration of efficacy of a Secto Co Ltd fly-killer were misleading.

March Register losses

There was a net loss of 19 pharmacies to the Pharmaceutical Society's Register last month when some 27 premises were closed down and eight were newly registered; in addition, an entry which had been deleted in error previously was reinstated. Of the new registrations, three were in London, and five in the rest of England; three of the closures were in London, 19 in the rest of England, three in Scotland and two in Wales.

'Legislation needed now' on metrication

The Metrication Board this week called for legislation to push through the change-over to the metric system as soon as practicable.

The Board's seventh annual report, "Going metric, progress in 1975" published on Tuesday, (HM Stationery Office, £1.35) states that four main factors now underline the need for speedy progress towards metrication. The factors are: Britain is now unequivocally a full partner in Europe, and membership of the EEC carries with it an obligation to adopt the metric system; in the USA, the Metric Conversion Act has been signed by President Ford; consumer organisations continue to press, in the interests of their members, for a speedy conclusion of the period of transition; and, it is clear to the Board from discussion it had had with retailers and retail organisations that the setting up of an "M" day for each sector of the retail trade, ending the use of imperial units, is indispensable if the trade is to go metric in an orderly fashion.

Among the Board's recommendations for Government action is that it should clearly state, and make widely known, the needs to complete the metrication pro-

gramme quickly; it should seek early amendment of the Weights and Measures Act and should begin consultations directed to the setting of terminal dates for the use of imperial measures in retail trade; and Parliamentary approval should be sought at an early date for further Orders to allow the remaining groups of prescribed quantity goods to be sold in metric packs and for the setting of definite cut-off dates for imperial packs. The report lists some 106 countries which are already metric, 48 which are going metric—including Australia, Canada, the Irish Republic, New Zealand and South Africa—and five which have not yet announced an intention to change to metric.

'Limit' to voluntary measures

Speaking at a Press conference to mark publication of the report, Lady White, the Board's deputy chairman, said that there was a limit to what could be achieved on a voluntary basis—and that had now been reached; legislation was needed now to complete the changeover to be fair to those who had already done so.

Metrication was also discussed in the Commons this week (see p573).

State control put to Labour Executive

The Labour Party's National Executive Committee is to discuss a report later this month which recommends that a future Labour Government should nationalise a part of the pharmaceutical industry.

Press reports indicated this week that the Party's home policy committee had agreed upon the report, whereas earlier reports had suggested there had been a disagreement over the extent of nationalisation. However, a spokesman for the Labour Party told *C&D* on Tuesday that the report was still being discussed by the committee, and it would be discussed again before the National Executive meeting on April 28.

At this stage the report before the home policy committee sets out two opposing views of what should be nationalised—although there appears to be agreement that some nationalisation is necessary. A study group under Dr David Owen, Minister of State, Department of Health, is reported to have recommended that only one of the major drug companies in Britain should be taken into state ownership, but they have also proposed that stricter rules should govern drug company expenditure—while the industry has a good record on exports, there is no check on "grossly excessive" expenditure on sales promotion.

Dr Owen's group is thought to have argued that if Britain were to take over UK subsidiaries of international companies, then patent rights could mean higher drug costs. However, another group, led by Mrs Judith Hart, MP, is thought to believe that the National Enterprise Board should be free to take whatever stake it was felt proper to acquire, rather than just restricting it to one company.

After being discussed by the National Executive, the report will then be discussed by the Party's annual conference this year, which will be held at Blackpool from September 27 to October 1.

Chemists' weekly turnover total passes £15m

National Health Service dispensing accounted for 53.1 per cent of independent chemists' turnover in November-December 1975, according to the latest *Retailer Report* from the A. C. Nielsen research organisation. For small independents* the proportion was 53.4 per cent and for large 52.9 per cent. [these figures are as corrected by Nielsen since the Report was printed—Editor]. For multiples-Co-ops the NHS share was 40.3 per cent.

Total weekly cash and NHS turnover



Mr John Adams (left), a senior member of the staff of wholesalers I. & N. Rabin Ltd, presents a bottle of Champagne to Mr Michael Richard, the manager of the newly opened branch of Underwoods Ltd, Baker Street, on the occasion of the opening. A similar ceremony was also held recently at Victoria Street, London

for all shops in the period amounted to just over £15 millions. Average weekly cash turnover per shop was £792 for large independents, £294 for small independents and £848 for multiples-Co-ops. The corresponding NHS turnovers were £908, £452 and £604. Large independents took 58.1 per cent of the sterling volume (cash and NHS), small independents 27.8 per cent and multiples-Co-ops 14.1 per cent.

In both October and November, independents dispensed 88.4 per cent of NHS prescriptions, averaging 2,222 per shop in October and 2,036 in November. For multiples-Co-ops the figures were 2,057 and 1,886 respectively.

*The figures are based on a revised Nielsen Drug Index. Small independents are now defined as "under £30,000" based on 1971 turnover; the Boots organisation is still excluded from the statistics.

□ Retail sales by chemists and photographic dealers during February were some

15 per cent higher than the same month a year ago. Figures issued by the Department of Industry show an increase of 14 per cent for retailers generally. The all chemists' index is 165 (1971=100) with the index for all businesses 172. Independent chemists' sales rose by 12 per cent and the index is 140. The figures do not include NHS receipts and no separate results are given for multiple or Co-operative Society chemists.

Further progress with new flu vaccines

The influenza vaccines for the coming winter will almost certainly include the new swine influenza virus (*C&D*, April 3, p482).

Both Duphar Laboratories Ltd and Duncan Flockhart & Co Ltd told *C&D* this week that the 1976-77 vaccines are likely to contain the prevalent influenza B Hong Kong, the new influenza A Victoria and A New Jersey (swine influenza) strains. Final confirmation on the exact proportions of each was still awaited from WHO and the Central Public Health Laboratory at Colindale.

Dr David Owen, Minister of State for Health replying to a series of questions in the Commons, said that officers of his department had been in direct touch with US health authorities about the swine influenza outbreak there. Present UK policy on vaccination was to protect those individuals particularly at risks such as those with chronic heart or lung conditions, and those especially exposed to infection. One million doses of the new vaccine should be available by October, he said, and the advisory group on influenza would assess requirements again at a meeting next month. While mass vaccination did not appear necessary at this stage, funds would be made available if a change in policy was called for later.

Guidance on new VAT rate

The VAT fraction corresponding to the new 12½ per cent rate, which has to be used in calculating VAT from tax-inclusive amounts, is 1/9th eg VAT on a tax-inclusive price of £2.25 would be £0.25. All goods and services previously chargeable at 25 per cent became chargeable at 12½ per cent on April 12.

Further explanations are given in notices no 716 "VAT: Changes in the tax rates" and no 740 "VAT: Reduction in the higher rate", being issued by HM Customs and Excise. Input tax should be deducted at the rate charged by suppliers, so if a tax invoice is received on which tax has been charged at the old rate, the actual amount of VAT shown should be treated as input tax and not recalculated at the new rate.

If April 12, 1976 falls part way through the tax period, retailers will have to make two calculations as explained in notice no 727 supplement. The first should cover the beginning of the tax period to close of business on April 11 (or 10 if no business done on Sundays) and the old VAT fraction of 1/5th used to calculate output tax on higher-rated supplies. The

second calculation should cover April 12 to the end of the tax period, using the 1/9th fraction.

Retailers using scheme D who do not supply higher rated goods or services should carry out an annual adjustment in June, July or August as explained in paragraph 20, supplement 727D. But if scheme D was started on or after January 1, 1976, no annual adjustment is needed this year. When the adjustment is eventually carried out, all tax periods from the date scheme D was started should be included. Retailers who are affected by the Budget change will have to carry out a scheme adjustment if scheme D has been used for more than one complete tax period before April 12, 1976. Details are given in notice no 740, and paragraphs 20 and 23 of supplement 727D. No adjustment is needed if the scheme has been used for less than a full tax period before April 12. Users of scheme E will need to evaluate stocks of higher-rated goods at close of business on April 11 and users of scheme J will need to evaluate stocks of all goods at this date, with separate totals for goods taxable at each positive rate.

Professional News

Pharmaceutical Society of Great Britain

Boots reserve right to advertise medicines

The Pharmaceutical Society's Council and the Boots Company have reached an agreement in which Boots reserve their right to advertise their medicines—but indicate that they have no current plans to repeat their recent advertising campaign (C&D November 22, 1975, p710).

An agreed statement approved at last week's meeting of the Society's Council reads: "The Council of the Pharmaceutical Society re-affirms its disapproval of advertising of proprietary medicines to the general public on the grounds that the excessive use of medicines is thereby encouraged. When commenting on the White Paper which preceded the Medicines Act 1968 the Council proposed that medicines sold to the public should be subject to a prohibition on advertising similar to that which then applied to medicines prescribed under the National Health Service.

"Nevertheless, it is still within the law for manufacturers of medicines to advertise to the public using their own name and this must apply to Boots as to any other manufacturer. The Boots Co Ltd has recently advertised some medicinal products on television under the trade name 'Boots' which is applied throughout the Boots organisation. While it is accepted that this manufacturing company is in competition with other manufacturers who advertise medicines, the name Boots is also used for the retail company Boots The Chemists Ltd and in the opinion of the Society those advertisements could be construed as directing the public to pharmacies of Boots The Chemists Ltd.

"The Boots Co Ltd reserves its right to use the trade name 'Boots' to advertise all its products and its rights as manufacturers as outlined above. Boots The Chemists Ltd reserve its right to advertise its non-professional services.

"Following discussions between the Pharmaceutical Society and Boots the Boots Co Ltd has said, as always, that it will bear the Society's view in mind and have indicated that it has no plans at this time to repeat the advertisement in question."

Business opening announcements

A complaint is to be made to the Statutory Committee concerning a company which had inserted "opening announcements" in a number of newspapers and professional journals and sent letters to ten embassies. The Ethics Committee was told that the owner of another pharmacy had also written letters to doctors.

A pharmacist whose comments on Sunday opening were reported in a newspaper, and subsequently construed as advertising the fact that he opened on Sundays, has apologised to the Society for his part in the publication. The

Ethics Committee was told that the pharmacist said he had not realised the reporter would prepare a report for publication in the newspaper, and had been shocked when his attention had been drawn to the item. He had given an assurance that he would take all steps to ensure that a similar article did not appear in the Press again.

Abuse of titles

The Society is to write to the Department of Health, once again requesting an amendment of Section 78 of the Medicines Act 1968, to control the growing abuse of titles and terms restricted by that section. It was reported to the Law Committee that the use by a "Drug store" of the term "Not just another chemist" had been held not to be contrary to section 78 of the Act. The Committee was told of further evidence of the growing use of "chemist sundries" signs and modifications of restricted titles.

January 1 for new legislation?

Council decided to suggest to the Department of Health that the appointed day for operation of Part III of the Medicines Act should be January 1, 1977. Council is concerned, because of the complexity of the changes, that there should be a suitable time lag between final agreement on the draft Statutory Instruments and their implementation.

Following a detailed examination of the Government's proposals, the New Legislation Committee submitted a number of recommendations to the Council which were approved. Among points that will be made immediately to the Department is one concerning emergency supply of prescription-only medicines by pharmacists. It will be suggested that, because of the emergencies that may occur over bank holiday weekends, for example, the provision of a maximum of five days' supply will be more appropriate than three days. Again, certain products commonly required in emergencies, for example asthma inhalers, are supplied in original packs which may constitute more than five days' supply. An amendment to take account of that fact is desirable.

It was reported to the New Legislation Committee that the agricultural and veterinary practice subcommittee of the Practice Committee had given preliminary consideration to the papers from the Ministry of Agriculture concerning veterinary medicines. The subcommittee proposed, and the Council agreed, that objection should be made in principle to the contents of the order relating to exemptions from the restriction on retail sale or supply of veterinary products, and to the permanent establishment of a special class of vendors.

The Education Committee has received

an analysis indicating the fields of practice in which 1975 graduates are undertaking preregistration experience during the current session. The Committee noted that 918 graduates were undertaking preregistration experience during this session and that the analysis indicated that normally about 93.5 per cent of graduates in any one year undertook preregistration experience in the following session. If that continued, it could be expected that from the estimated 1,043 graduates in 1976, 975 places would be required, and from the estimated 1,120 graduates in each of the next two years, 1,047 places would be needed.

The Society is to ascertain as quickly as possible the number of places that will be available for preregistration experience in the 1977-78 session in the hospital service, and in large multiple general practice companies. Mr J. P. Kerr suggested that the Society should write to the Pharmaceutical Services Negotiating Committee, pointing out the difficulties that were being experienced, so that the information might be used to bring about an early settlement of the negotiations with the Department of Health concerning grants to general practice employers.

Dr D. H. Maddock said that, in his experience, some of the students coming forward for preregistration experience were not acceptable for work in a pharmacy. Mr J. E. Balmford said that it was important to emphasise that there were more places available than students, provided graduates were prepared to move.

The Department of Health has confirmed to the Society that further expansion in general practice refresher courses cannot be contemplated at present as all NHS expenditure is being subjected to cash limits. There would be a 25 per cent increase in sessional fees, effective for courses which started on or after January 1, 1976. To accommodate increases in travelling and subsistence allowances, agreed at regular intervals within the Whitley Council procedure, the annual allocation to regional health authorities for Part IV courses are to be increased by 25 per cent.

'Head in the sand'

During a discussion on the qualification of the "qualified person" in the pharmaceutical industry under EEC regulations, and also of the problem of filling quality control posts in the hospital service, Mr J. A. Myers said that quality control in hospital pharmacy required those concerned to be trained in hospital pharmacy, and pure chemists were not so trained. Mr C. C. Stevens said that Mr Myers had his head in the sand if he thought that chemists could be prevented from assuming quality control functions.

After long discussion, Council agreed that a student who was undertaking the Bradford sandwich course but, through illness, had failed her part I finals, should have her first period of practical training accepted by the Society, provided that she was successful in her September examinations. Concern was expressed both in the Education Committee and in full Council lest a precedent should be created in relation to similar situations in the final examinations of the three-year degree. It

Continued on p556

A BREATH OF FRESH HAIR FROM THE MAKERS OF TEGRIN.



Stafford-Miller announce Tegrin Herbal – a breath of fresh air in the dandruff shampoo market.

New green herbal-fresh Tegrin, combines Tegrin's proven long-lasting dandruff control with a highly desirable fragrance.

CONSUMER RESEARCH SPELLS SUCCESS

New Tegrin Herbal was preferred overwhelmingly by medicated users, not only for its dandruff control but also because it left their hair really clean, shining and beautiful.

That's why Tegrin Herbal will attract a whole new market to the brand.

ON THE AIR

A £200,000 concentrated TV campaign, using a 30 second commercial, breaks nationally on May 3rd in all areas.

DISPLAY

Introductory stocks come in counter display units and attractive point of sale material is also available.

MORE PROFIT

Tegrin Herbal shows above average profit – special introductory bonus is now available at your wholesaler – so stock up before TV advertising starts.

ORIGINAL TEGRIN (CREAM AND LOTION)

TV support continues throughout 1976 for this highly successful brand.

STAFFORD-MILLER LTD
HATFIELD, HERTS.

PSGB Council

Executive election in Wales

Continued from p554

was, however, considered that if the same circumstances arose, a period of preregistration experience would only be accepted retrospectively if it had been demonstrated at a later examination that the course work had been satisfactorily completed before the period. The Committee had been agreed that each case should be considered on its merits.

The Organisation Committee recommended that the election for the Welsh Executive should be conducted on the same basis as that for the Scottish Department Executive, with no policy statements published. Mr A. Howells argued that it was absurd that an election address could not be sent out especially when the body was being set up; it should be left to candidates to decide. Mr G. Walker supported Mr Howells, but Mr Balmford said that over the years the Scottish Department Executive had come to the conclusion that policy statements were superfluous and unnecessary. He suggested that even the Society's Council might benefit if there were no policy statements. Dr D. H. Maddock said the Welsh Executive would be implementing decisions of the Council and people might be elected on policies it might never be possible to implement; election should be on the basis of the record of the people standing. The recommendation was approved.

Council considered a draft FP Notice giving details of the procedure to be adopted by pharmacists when presented with an incomplete prescription after the new BNF, which omits footnotes, comes into force on June 1. Representatives of the Society had pressed the Department of Health for greater professional discretion than has been obtained, but as some concessions had been gained Council agreed to the contents. The objectives the Society sought to achieve will be published when the FPN is issued.

Bonus offers on medicines

The Society has been assured by Vestric Ltd that Collis Browne's Compound is to be deleted from the Vestric Value scheme. Vestric also asked that the Society should write to other wholesalers who were offering Collis Browne's Compound on similar terms. It was reported to the Council that the National Association of Pharmaceutical Distributors had agreed to bring to the attention of its members Council's view that any medicine about which there is evidence of misuse, should not be promoted by the offer of bonus terms or additional discounts.

Council considered a copy of a letter from an area pharmaceutical officer to his administrator which stated that provision should be made for a pharmacy in any new health centre. Following representation from the Society, the APHO has been

informed by the Department that this is not so. Government policy is stated in the Department's document HRC (74) 20, paragraph 24, which asks AHAs and FPCs to help pharmacists whose pharmacies are likely to be affected by a proposal to establish a health centre to agree on arrangements for the provision of pharmaceutical services appropriate to the situation. The pharmacists should be encouraged to get together to provide a service in or adjacent to the health centre; that may also enable pharmaceutical services to remain available in areas at a distance from the health centre. The document containing the advice is to be redrafted and present policy restated. The Society will be consulted before publication of the new document.

Other items considered include:

□ The Society is to support the Consumers' Association in its proposal to ask the Department of Health to finance distribution of *Drug and Therapeutics Bulletin* and the *Adverse Drug Reactions Bulletin* to pharmacists.

□ British insulin manufacturers are to be asked to produce a chart for display in pharmacies giving details of present packs of insulin.

□ The chief pharmacist at the Department of Health has been asked to supply the Society with information about the procedure and probable timetable of events concerning the Government's Royal Commission to consider the state of the National Health Service so that Council can consider submitting evidence.

□ Heads of schools of pharmacy are to be offered the services of the elected members of the agricultural and veterinary practice subcommittee as speakers to students on agricultural and veterinary matters. A panel of speakers is to be established which heads of schools of pharmacy can invite to give professional non-commercial talks on industrial pharmacy.

□ Council felt that confusion could be caused if some Area Chemist Contractors

Committees changed their titles to Local Pharmaceutical Committee, and others did not. The Pharmaceutical Services Negotiating Committee is to be asked to consider the desirability of a uniform title.

□ Representatives of the Society are to meet the Department of Health to discuss representation of pharmacists on the Medicines Commission.

□ The National Association of General Practice Employee Pharmacists (NAGPEP) is to consider the submission to the Society of an application for a membership group. The application will include proposals concerning the relationship between the governing committee of the group and the Council, through the Practice Committee or the general practice subcommittee.

Council candidates

Sixteen candidates have accepted nomination for the Pharmaceutical Society's Council elections to be held next month. The candidates—who are to contest the seven seats due to be vacated this year—are as follows:

J. E. Balmford; J. P. Bannerman; S. Blum; C. R. Hitchings; J. P. Kerr; M. M. Leaman; Enid Lucas-Smith; A. G. M. Madge; J. A. Myers; R. W. Odd; T. E. Owen; J. G. Roberts; D. N. Sharpe; C. C. B. Stevens, Linda J. Stone; T. E. Whaley.

Some eight candidates have accepted nomination for the five posts of auditors. They are:

A. H. Briggs; E. A. Brocklehurst; K. Brooke; M. Crane; Sir John Hanbury; Sir Harry Jephcott; L. G. Matthews; A. G. Shaw.

Nominations are to be invited for candidates for the Society's Welsh Executive which is to be set up this year: the closing date for receipt of nominations is May 10, and voting papers will be issued to pharmacists resident in Wales on May 21, with June 15 as the closing date for receipt of voting papers.

Reception held for senior PSNI members

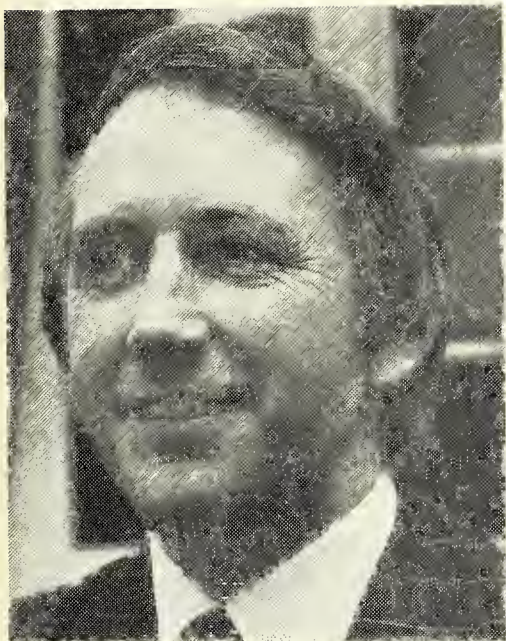
The Pharmaceutical Society of Northern Ireland's golden jubilee celebrations culminated on the evening of April 2, when the president, Mr T. G. Eakin, held a reception for senior members of the Society in the Society's House. Afterwards Mr N. C. Cooper, MPSNI, talked on the "History of Pharmacy in Ireland".

The reception was attended by some forty senior members including Mr W. J. Rankin, the oldest member of the Society, who is in his nintieith year and who acted as honorary treasurer for the Ulster Chemists' Association for many years. Also present was Mr R. Gibson, OBE, who was chairman of the Contractors' Committee when the Health Services Act (Northern Ireland) 1948 was introduced. After seeing an exhibition of old items of pharmaceutical equipment loaned by members, the senior members were entertained in the Council room.

Items which attracted attention at the exhibition included a copy of the opening notice inserted in the *Belfast News Letter* March 14, 1825, by Grattan & Co; a book

of remedies said to have been published in 1602 and the certificates of qualification of Theophilus Harper and William Macartney. The latter had the signature of Dr (later Sir) William Whitla. Another certificate of interest was one issued in the name of Samuel Belcher Chapman by the Apothecaries of the City of London on October 13, 1831. Mr Chapman was "carefully and deliberately examined as to his skill and abilities in the science and practice of medicine" and was "entitled to practise (as an apothecary) in any part England and Wales except the City of London, the Liberties or Suburbs thereof or within ten miles of the said City". (The certificate came from a business founded in Ipswich in 1800). A book "Opening a Pharmacy" published by Allen & Hanburys Ltd attracted much attention. It contained advice about the choice of site, the lease, structural alterations, the window and its lighting, fixtures and fittings and stock. The cost of the stock suggested was £165, with "an additional £60 for proprierities other than our own".

People



Mr Alan J. Smith, MPS, has been appointed chief executive designate of the Pharmaceutical Services Negotiating Committee. Apprenticed with Boots Ltd, he qualified from Leicester in 1955 and after a further period with the company, spent five years as a Glaxo Laboratories representative. Entering private practice, he eventually owned eight pharmacies but sold them three years ago to concentrate on studying law, becoming articled to a firm of solicitors. He hopes to be fully qualified as a solicitor before taking up his new post on September 20.

Professor E. J. Shellard, Chelsea School of Pharmacy, has been nominated as the Pharmaceutical Society's representative on the committee of management of Chelsea Physic Garden for a further period of four years from June 9.

Mr David Ennals has succeeded Mrs Barbara Castle as Secretary of State for Social Services. He was Minister of State for Health and Social Security from 1968-70 and has been Minister of State at the Foreign Office since March 1974.

Mr K. Gor MPS helped to organise a beauty fair recently on behalf of Christopher White and Jones Ltd. A local hall was hired in Letchworth, Herts and 200 women invited to the "mini-bazaar" at which over 20 different beauty houses displayed their products, some also giving make-up demonstrations. The idea was so successful that Mr Gor is hoping to hold a bigger fair in October.

Mr G. W. Herdman FPS has been elected president of the Proprietary Articles Trade Association for 1976. A member of the PATA council since 1964, Mr Herdman qualified in 1950 and has been a proprietor pharmacist since 1953. He has three pharmacies in Sunderland. He has been an active member of the Sunderland Branch, Pharmaceutical Society, having been chairman, secretary and social secretary, and is at present serving his second term as chairman. Among his other pharmaceutical interests he is chairman of the Sunderland Area Pharmaceutical Committee, a member of the Sunderland Chemists Contractors Committee, the Border Region

Topical reflections

BY XRAYSER

Advertising

Following the reaffirmation at last year's Representatives' meeting of the Pharmaceutical Society of the views of pharmacy in regard to the advertising of professional services, either directly or by suggestion, it was to be expected that, sooner or later, some aspects of the matter would become the subject of complaint. Several specific examples of material considered to offend have been referred to the Statutory Committee which has, from time to time, pronounced on the particular case before it; and since the question is one of ethics and not of law, it looks as though the Committee may find itself only at the beginning of its labours in that direction.

In recent times it has looked almost as though there are those who have been engaged in cautiously testing the temperature of the water with a tentative toe before finally jumping in. From its very nature, the subject can rarely be capable of clear cut definition such as may be applied in cases in which law is the criterion. It seems possible, therefore, that the nature of any alleged ethical offence will require to have separate and individual assessment, and to be considered on its own merits. In that event, anyone who is looking for ways of countering the wishes of the Council and the annual meeting, and who thinks he has found the answer, may discover that the circumstances differ to a degree not immediately obvious.

St Andrews

Publication of the programme for the British Pharmaceutical Conference reminds us that Herrick was not far wrong in his reference to the passing of time. The venue is a very attractive one. St Andrews itself abounds with historical interest and fine old buildings, and it is beautifully situated on the sea. The university is very old and its medical faculty was the first in Scotland. I feel sure that the address by Professor Sir Donald Douglas on that subject will prove a great attraction for the visitors, for he is a renowned lecturer.

In some respects the programme is sadly deficient. There is no reference to shanking or to the bioavailability of eagles and birdies. That seems a bit rough. Nevertheless, I fully expect to see a colourful assemblage of pharmacists, all pushing strange little vehicles carrying the oddest-looking assortment of weapons which—I speak feelingly—seem to be singularly badly designed for the purposes to which they are put. But apart from the few shortcomings mentioned, the programme itself is one of great interest and value, and I feel sure that the week will be a memorable one.

Committee, the Northern Regional Pharmaceutical Committee and the Sunderland Family Practitioner Committee. He is also chairman of the International Committee of Bishopwearmouth Rotary Club.

Deaths

Davidson: On April 7, William Johnston Davidson, MPS, Martyn Street, Airdrie, Lanarks, aged 61. He qualified in 1940.

Young: On March 30, Mr Robert Rankine Scotland Young, FPS, 5 Duncroft Gardens, Shanklin, Isle of Wight. Mr Young qualified in 1941.

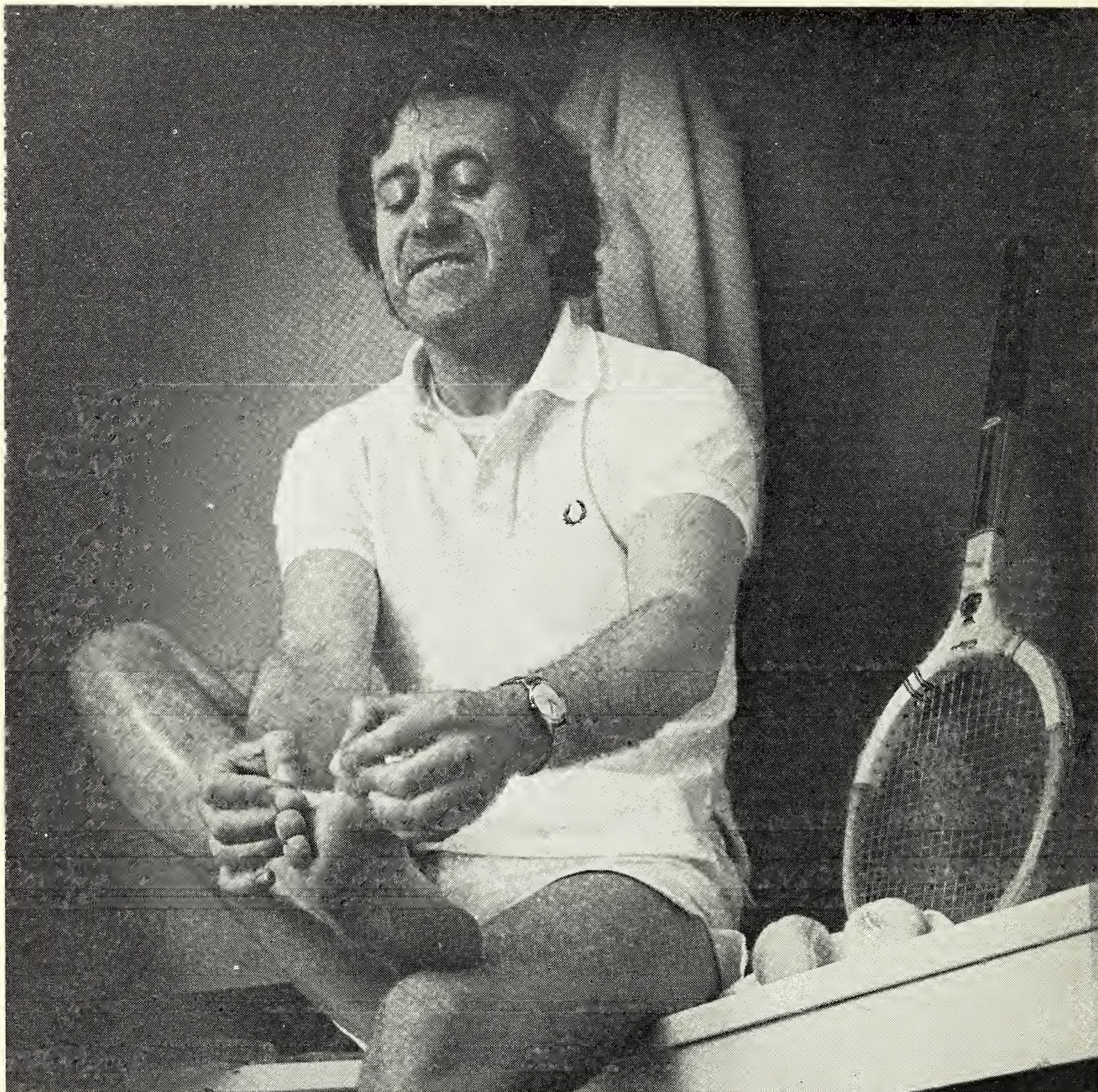
Dr White's promotion—correction

The figure quoted for Lilia-White (Sales) Ltd's 1976 promotional support for new Dr White's appeared wrongly last week (p524) because of a printer's error. The correct amount is £350,000.

New BNF published

A new edition of the British National Formulary has just been published—but without the footnotes which formerly gave information on strength and quantity to be supplied in the absence of directions from the doctor.

The new issue (published by the Pharmaceutical Press, 17 Bloomsbury Square, London WC1, £1.55) covers the period 1976 to 1978. The copyright is held jointly by the Pharmaceutical Society and the British Medical Association, and a Joint Formulary Committee of the two organisations prepares the book. The change in the new edition reflects the feeling of the Society's Council which decided last May that such footnotes were no longer professionally acceptable (*C&D*, May 17, 1975, p680).



After the match, the scratch.

A lot of your customers are discovering the new-found joys of competitive sports.

And many of them, Athlete's Foot.

Phytocil Cream's anti-fungal action clears the immediate condition and with Phytocil Powder prevents re-infection. Phytocil also gives excellent results in the treatment of other fungal infections.

Which is one of the reasons why you should always stock Phytocil Cream and Powder.

Good reasons for stocking Phytocil are:-

1. 33 1/3% off retail price.
2. Direct orders charged 72 as 54 or 36 as 30, unit packs either Cream and/or Powder.
3. Phytocil terms as above can also be included with other Biovital/Radiol/Wade products, qualifying for 12 1/2% on £40 orders or 10% on £20.

4. Current advertising in medical media and detailing to Doctors.

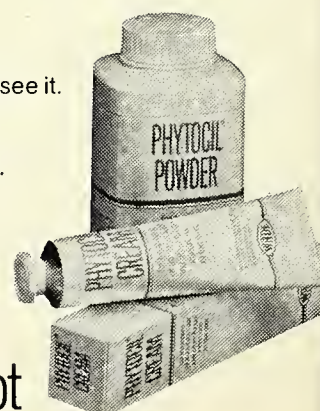
5. Colourful point of sale dispenser.

So display Phytocil where your customers can see it.

Not only will it solve their problems.

It will give them something to look at while they stand there shifting from foot to foot. To foot. To foot. To foot.

PHYTOCIL[®]
Effective relief of Athlete's Foot



Wade Pharmaceuticals Ltd Witham Essex CM8 3AG. A subsidiary of Radiol Chemicals Ltd

New products

Photographic

SX-70 addition

A lower-priced camera utilising SX-70 film is to be introduced later this year by Polaroid (UK) Ltd. The new camera—model 2000 (about £60)—will be available in limited quantities this summer, with a full-scale consumer launch scheduled for September.

The model 2000 is non-folding, but has many systems in common with the other SX-70 cameras, including film ejection, automatic exposure control, and flashbar control. The lens, a three element, 116mm, $f/9.4$ plastic optic designed and manufactured by Polaroid, has a focus range from 3ft to infinity and is adjusted by use of a distance scale imprinted on the lens barrel. The viewfinder consists of a bright Galilean system (Polaroid (UK) Ltd, Ashley Road, St Albans, Herts AL1 5PR).



Cosmetics and toiletries

French Almond fragrances

The House of Roberts Windsor are adding patchouli, ginseng and blossom fragrances to their French Almond range. Merchandisers with backing cards will hold five spray Colognes of 55g (£1.50) and twelve 25g (£0.95), as an introductory parcel (£34.95 trade) for the launch.

Makers say patchouli brings the wearer "the mystique of the East"; ginseng is "warm and mossy with light citrus top-notes based on a blend of vetiver, oakmoss, sandalwood and amber", and blossom is "a flowery symphony—light and young" (Eylure Ltd, Grange Industrial Estate, Cwmbran, Gwent).

Skin Dew visible action

Helena Rubinstein are using a milk protein, *fermentats lactiques*, as the main active ingredient of Skin Dew visible action products. Cleanser (200cc, £2.25), emulsion (58cc, £2.60), night cream (30cc, £2.25 and 55cc, £3.55) and eye cream (£2.17) contain visible particles of the protein which, the makers claim, provides a moisturising base that retains pH balance, without undesirable oiliness (Helena Rubinstein Ltd, Central Avenue, East Molesey, Surrey).

Revlon introductions

Revlon say their automatic creme-on eyeshadow (£1.40) is "waterproof, smudge-proof and creaseproof". The creamy liquid comes with a sponge-tipped applicator, in white, beside seven lightly frosted shades: soft blue, winter blue, fresh green, shiny green, warm brown, rich russet and frostiest white.

Lipgloss (£0.90) containing a protective sunscreen, is being introduced in shades of earthwine, lacquer red, plumrose, coral, and clear. Revlon say the gloss can be applied with the finger, or with their new retractable brush (£1.40).



New to the Natural Wonder range is Fresh Face foundation (tubes £0.65), said to blend easily and conceal minor flaws. "Oilfree and suitable for all skin types", it comes in shades of ivory cane, soft sun, golden bamboo, warm sand and toast.

Keep Blushing creme blusher (£0.75) in pink, cherry, peach and bronze is a recent introduction (Revlon International Corporation, 86 Brook Street, London W1).

on TV next week

Ln—London; M—Midlands; Lc—Lancashire; Y—Yorkshire; Sc—Scotland; WW—Wales and West; So—South; NE—North-east; A—Anglia; U—Ulster; We—Westward; B—Border; G—Grampian; E—Eireann; CI—Channel Island

Anadin: All except E

Close-up: All except E

Denclen: M, Lc, Y, NE

Elastoplast: All areas

Elbeo: M, Y, Sc, NE, U, We

J-cloths: Ln, So, A

Johnson's baby powder: All except E

Kodak Instamatic cameras: All except E

Listerine: Ln

Lucozade: All areas

Poise: All except E

Radox: All except U, E

Slender: All except E

SR: All except E

Sunsilk setting lotion: All except U, E

Sunsilk shampoo: All except U, E

Sure: All except U, E

Three Wishes soap: All except U, E

Prescription specialities

DEPIXOL-CONC injection

Manufacturer Lundbeck Ltd, 48 Park Street, Luton, Beds

Description Flupenthixol decanoate 100mg per ml, in thin vegetable oil, in an amber glass ampoule

Indications Moderate to severe schizophrenia and other psychoses

Contraindications Intolerance to oral neuroleptic drugs. Parkinsonism, severe arteriosclerosis, senile confusional states, advance hepatic, renal or cardiovascular disease. Not for children

Dosage 100-200mg every 2-4 weeks, up to maximum 400mg every week by deep intramuscular injection

Precautions Treatment may be continued in previously unrecognised pregnancy, particularly after first trimester, if benefits outweigh risks to foetus. Allow interval of 7 days after discontinuation of MAOI therapy. Aspirate before injection to prevent intravascular injection

Side effects Extrapyrimal symptoms, occasional depressive reactions. Rarely, galactorrhoea

Storage At room temperature protected from light. Shelf life 2 years

Dispensing diluent Must not be diluted

Packs 10 x 1ml ampoules, (£37.62 trade)

Supply restrictions PI, S4B

Issued April 1976

Orap additional strength

Orap 4mg has been introduced by Janssen Pharmaceutical Ltd, Janssen House, Chapel Street, Marlow, Bucks SL7 1ET. Each green, scored, uncoated tablet is marked "Janssen" on one side, 0/4 on the reverse, and contains pimozide 4mg (250, £28.42 trade).

Duromorph in tens

Laboratories for Applied Biology Ltd, 91 Amhurst Park, London N16 5DR, are now presenting Duromorph in boxes of ten ampoules (£1.40 trade) instead of six. Price per ampoule and formulation are unchanged.

Mexitil capsules and injection

Mexitil capsules and injection were wrongly classified as "prescription only" (C&D, April 3, p486). Boehringer Ingelheim Ltd, Southern Industrial Estate, Bracknell, Berks RG12 4YS, say there are no legal restrictions on sale or supply but Mexitil should be used only under medical supervision [corrected note].

Lanitop tablets and injection

Lanitop is a new cardiac glycoside from Roussel Laboratories Ltd, Roussel House, Wembley Park, Middlesex HA9 0NF. The tablets contain medigoxin 0.1mg (100, £1.76 trade) and the injection contains medigoxin 0.2mg in 2 ml (5 x 2ml ampoules, £0.70). At present available to selected hospitals only, Lanitop will be distributed nationally on May 1. Full information will be published later.

Trade News

Agfa-Gevaert introduce Valupak

Following on from the success of the Agfachrome Super 8 "jumbo" four film pack last year, Agfa-Gevaert Ltd, Great West Road, Brentford, Middlesex, are marketing seven of their most popular film sizes in multiple packs under the name of "Valupak". In addition, each of the three types of Agfachrome Super 8 and Agfacolor CT and CNS films features an offer designed to attract the average purchaser.

Each Super 8 Valupak contains four films and features two consumer offers—a free Agfacolor beach ball and a free title card. A different approach is adopted for the Agfacolor CT Valupak—the three most popular sizes of CT film are twin-packed and each pack offers a free pocket viewer. CT Valupaks are available in packs of two CT18 35mm 36 exposure, two CT21 35mm 36 exposure or two CT126 20 exposure films; CT126 slides are returned to the user in a special viewer-cum-slide storage box.

Based on research which suggests that a large percentage of colour negative film is purchased by women, of whom many have children in tow when shopping, Agfa decided to make the incentive a free ice cream, so each Agfacolor CNS Valupak has a voucher worth 7p off any Lyons Maid product. CNS Valupaks are available in packs of two CNS 35mm 20 exposure, two CN110 20 exposure or two CNS126 20 exposure films.

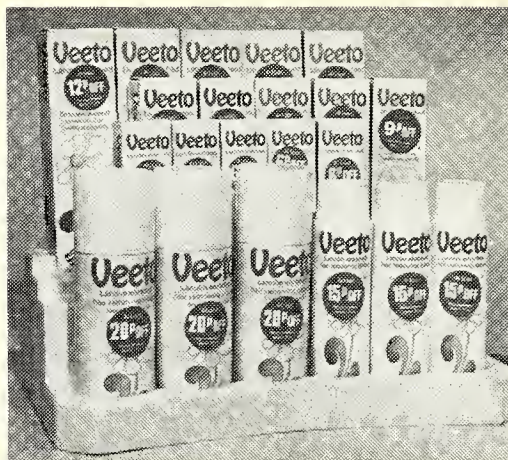
All Valupaks have space for individual retailers to mark their own special price. To back up the campaign at the point-of-sale, a varied selection of window stickers, streamers and counter dispensers are available and a large scale advertising campaign has been arranged with national newspapers during the summer.

Campaigns for R & C products

Consumer advertising aimed at the young market will boost sales of Valderma soap this spring, say Reckitt & Colman's pharmaceutical division, Dansom Lane, Hull HU8 7DS. A four week campaign includes 23,000 screenings in all ABC cinemas of a 30-second colour advertisement featuring the Valderma soap competition with £1,000 in prizes.

The regular Valderma sponsored "Star horoscope show" every Monday on Radio Luxembourg continues, now reaching half a million listeners everytime, with extra soap commercials at peak times.

Top rally driver Roger Clark is being sponsored in this year's caravan road rally, April 23-25. He will be driving a Cortina 2000 XI estate car coupled with a Sprite Alpine caravan, both finished in the Dettol cream colours of pale pink, blue and white, with the product name and Reckitt sword symbol conspicuous. Aim of the sponsorship is to get the product name



New Veeto counter unit

across to caravanning and camping enthusiasts, and to the general holiday-maker. The rally begins at Silverstone and contestants travel to Wales.

Price reductions to the customer of around 20 per cent are offered by the Veeto counter display unit now being sold into retailers. Each polystyrene tray contains six small tubes, flashed at 6p off, six medium tubes at 9p off, six large tubes at 12p off, three aerosols at 20p off, and three lotions at 15p off. Reckitt Toiletry Products, Stoneferry Road, Hull, are backing the product by a series of full page colour advertisements running in 16 women's magazines from May until September. Two advertisements will be used—one covering the whole range and one specifically for the aerosol pack.

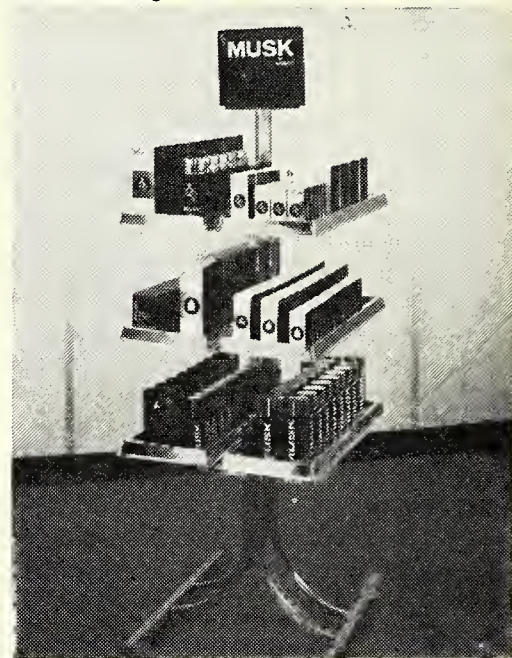
Houbigant offers

Houbigant Ltd, Salbrook Road, Salfords, Redhill, Surrey have announced a series of sales promotion offers which will run

until the end of June: Alyssa Ashley musk spray mist, 28g, 42 invoiced as 36; patchouli spray mist, 28g, 28 as 24; ambergris spray mist 28g, 14 as 12.

With each promotion pack of 12 Monsieur Houbigant 100cc after shave and 12 Monsieur Houbigant musk after shave 100cc, one free pack of each plus a display unit. With each promotion pack of 12 shaker talcs each of Chantilly and Quelques Fleurs, one free pack of each plus a display unit. Retailers purchasing £135.89 worth of Houbigant products will

This display unit is loaned to retailers who purchase £123.50 of an assortment of musk, patchouli, ambergris and Monsieur Houbigant musk, plus testers from Houbigant Ltd



SH:TA116

LONG-ACTING

Histryl

'SPANSULE' CAPSULES

day and night protection from hay fever symptoms

In a unique sustained-release 'Spansule' Capsule for long action.
Side effects are infrequent and minor.

one night and morning

When asked to recommend a preparation for relief of hay fever...
RECOMMEND HISTRYL—WITH CONFIDENCE




receive showcard and testers and 60 free "Gift with Purchase" fragrant foam bath in a selection of Chantilly, Quelques Fleurs and musk for customers who purchase Houbigant products for £2 or over.

Piz Buin display

A new counter dispenser from Piz Buin, Jean Sorelle Ltd, 117 Great Portland Street, London W1, carries selected best-selling lines, including factors 3, 4 and 6. The display features a sun-tanned girl and identifies suitable factors for different skin types.

Summer advertising breaks in May, with a four-page full-colour spread in *Vogue*, colour spaces in *Harpers & Queen*, *Cosmopolitan*, 19, *Honey* and *She*, black and white advertising in *The Sunday Times*.



For pharmacies only, a blue and white counter unit for Hedex tablets is designed to carry packs of 16, 24 or 40. It features the logo of Sterling Health Products, Surbiton, Surrey, and advertising theme "powerful against headaches—gentle on your stomach"

Beecham toothpaste brands' success

Research shows that Macleans toothpaste is now volume leader of the whole toothpaste market, claim Beecham Proprietaries Beecham House, Great West Road, Brentford, Middlesex. According to the latest independent sales audit, Macleans now has a brand share of 21 per cent in a market currently valued at £43m at rsp.

While the four brands of Colgate-Palmolive together still lead as a "toothpaste house" with a collective volume share of 30 per cent, Beecham are said to be catching up fast. Their two brands, Macleans and Aquafresh, have put on four percentage points of volume between them, currently adding up to a Beecham

"house" share of 28 per cent. The three Gibbs brands total under 20 per cent and Crest 12 per cent by volume, say Beecham.

Charles Auld, Beecham's toiletries marketing director, says that Macleans and Aquafresh growth is particularly encouraging at a time when people are using more toothpaste. "We estimate that consumer buying has now risen by almost 10 per cent above even those levels reached during that unprecedentedly fierce battle which was fought out between the major competitors over the latter part of 1975."

Co-op pharmacies run 'quiz'

Co-operative Society pharmacies are currently running a "musical movie quiz" in conjunction with Gillette. The quiz is promoted in advertisements in *Daily Express*, *The Sun*, *Daily Mirror* and *Daily Record* and is open to purchasers of a range of special price Gillette products.

Booklet on aspirin

"Pain—the role of aspirin," a booklet containing extracts from a Royal Australian College of Physicians' symposium, held in October 1974, is being distributed to retail pharmacies by Reckitt & Colman pharmaceutical division representatives. Copies of the full proceedings of the symposium, which was attended by international experts in the field of analgesia, are available from the division at Dansom Lane, Hull.

Isogel pack redesigned

Allen & Hanburys Ltd, Bethnal Green, London E2 6LA, have introduced a new, improved pack of Isogel 200g. The carton is fitted with an integral laminated lining of special quality paper and polythene to protect the product in all normal storage conditions; it is heat sealed at both ends. The pack design also allows for more efficient use of shelf space and it has a "tear-off" top for ease of opening.

Close-up with fluoride campaign

Elida Gibbs Ltd, PO box 1DY, Portman Square, London W1A 1DY, are spending £515,000 on a new national television campaign for Close-up with fluoride, running at least until the end of May.

Junior aspirin added to range

A new child-resistant pack of 24 white junior aspirin tablets 75mg (12 units, £1.32 trade) is available from Approved Prescription Services Ltd, PO box 15 Whitcliffe Road, Cleckheaton, West Yorks.

Tugon changes

Two changes in the presentation of Tugon ant killer, to improve the storage and use are: The cardboard pepperpot carton has been waxed and a free-flowing agent has been added making it easier to distribute.

Size change of Anthisan

The 500g size of Anthisan cream from May & Baker Ltd, Dagenham, Essex RM10 7XS, has been replaced by a 450g size (£1.26 trade).

Bonus offers

Bengue & Co Ltd, St Ives House, St Ives Road, Maidenhead, Berks. Derbac anti infestive range and Metanium napkin rash ointment. 12 invoiced as 10. Until May 7. Ravika Ltd, 2a Tottenham Road, Palmers Green, London N13 6HX. Valette metallic hairsprays and colours. 14 invoiced as 12 until May 31.

SH:TA136

Histryl

'SPANSULE' CAPSULES

offer a good deal
for your customers
and for you!

Low outlay

Special introductory offer (while stocks last)
24 cartons charged as only 20
—ONLY £8.00 (excluding VAT) per outer of 24

High profit

Retail Price—65p per carton (including VAT)
Profit per outer—£6.40
i.e. over 26½p per pack
(44% on selling price)



Available through
your local wholesaler,
or contact your SK&F
representative for
further details.

'Histryl' (diphenylpyraline hydrochloride)
and 'Spansule' are trade marks.

SK Smith Kline & French Laboratories Limited
Welwyn Garden City, Hertfordshire AL7 1EY

French pharmacists' fight against the 'mutualist' pharmacy

"Pharmacists ready to drop the shutters." That bold headline led the front page of the Paris newspaper France Soir earlier this year and preceded an extensive report by Christine Caron on French pharmacists' fears that the Ministry of Health would authorise the creation of a 58th "mutualist" pharmacy at Libourne. The Council of State was about to come to a final decision but made it known that the case against the pharmacy was not regarded as a good one. "Thus the old conflict between mutualist and traditional pharmacies breaks out again", says France Soir. The paper's report, translated in full, goes on . . .

The pharmacists are ready to do anything. They'll go as far as a strike. They have decided on their plan of battle. It is a snow ball operation. If the opening of the mutualist pharmacy is authorised—immediate closing of all pharmacies in the town, within 24 to 48 hours closing all those in the *département*, then of all those in the region, then a national strike. An emergency service such as that on Sundays is nevertheless planned. Why this anger? Why these serious threats on the part of the professionals who ensure a public service? Because the pharmacists are afraid that the Ministry of Health will authorise the creation of the 58th mutualist pharmacy in France. "For us it is a question of life and death", they say. The decision of the Council of State has revived their concern.

What are these mutualist pharmacies which the traditional pharmacists portray as "dehumanised medicine supermarkets"? They are pharmacies created and managed by friendly societies. In France there are 9,500 local friendly societies plus some 60 national ones, covering sickness, old age and death. Anyone can create a friendly society of this kind. It is enough to recruit members who pay a subscription and to have the organisation approved by the Préfecture or the directorate of social security at the Ministry of Works.

Friendly societies

There are other friendly societies: the mutual insurance companies protecting primarily material things (cars, flats, etc). They are dependent on the Ministry of Finance and their creation is more complicated. So a number of friendly societies created their own pharmacy. The advantage for the customer is that it is as though the medicaments were free. Conditions: the customer must be a member of a mutual benefit society and his friendly society must belong to the organisation that formed the pharmacy. Average subscription for this kind of friendly society: 200 to 300 F a year. 20m people in France benefit from this mutualist system. Anyone can belong to it. If the French people wish there can be 50m members tomorrow.

These mutualist pharmacies which sell only medicines—but not beauty products or other accessories—have a "surplus of receipts". In fact they charge the same

price for medicines as traditional pharmacies. The user does not spend anything because the pharmacy advances him the amount of the bill. But the pharmacy recovers the sums advanced from the Social Security (for 70 or 80 per cent) and from the mutualist group for the rest. The mutualist pharmacy thus has, in the end, the same return as a traditional pharmacy. If one wants to be precise, it must be said that it grants a rebate of 5 per cent to the Social Security, but that it often obtains discounts from suppliers for quantity purchases. These surplus receipts correspond to the profits of the private pharmacies.

These surpluses are kept by the mutualist pharmacies, on the one hand to reduce members' subscriptions and on the other for social work (clinics, retirement homes, homes for the handicapped, etc). Finally the mutualist pharmacy often ensures the delivery of medicines. Pharmacies formed

by the professional friendly societies in particular deliver them to member businesses.

We cannot fight against the competition, say the traditional pharmacists. All the chemists' shops can do when a mutualist pharmacy sets up is to close their doors. Of course, emergency custom will remain for us, but that is not enough to live on; the largest sales are made to people who are seriously ill and for them the system is very tempting where mutual pharmacies are established.

Contact lost

This system certainly cuts out the traditional contact of the corner pharmacist with his customers. However, in the case of the mutual pharmacies, medicines are almost always handed out by pharmacists, who also carry out their advisory role.

There you have it. On the one hand 17,000 chemists' shops and on the other 57 mutualist pharmacies, whose turnover represents 2.5 per cent of total turnover in pharmacies. The pharmacists have reached the end of their tether. Towards what kind of society are we heading?

In the view of the supporters of the friendly society an advanced liberal society cannot tolerate the reinforcing of an actual monopoly.

A pharmacist - or a grocer ?

The article was followed by an item headed "Three questions to A. Aubigeon, vice-chairman of the Association of Pharmacists in France"

Are you not as much a grocer as a pharmacist?

That is a criticism often heard, but totally unjustified. The average pharmacy derives 80 per cent of its turnover from the sale of medicines, the rest being made up of cotton wool and dressings, medical accessories, skin care and dietary products. It is true that you see in some chemists' shops things that you should not find there. There are cases of that kind of thing, which can in no way be considered the general rule in our profession.

Why haven't you accepted a widening of the agreements with friendly societies, thus allowing members to shop with you on the same terms as at their own pharmacies?

I would first of all point out that almost everywhere in the country there are a number of agreements that have been made with friendly societies allowing the serving of medicines free of any charge to members of societies belonging to the conventional system. But I must say that the National Federation of Friendly

Societies has never proposed signing a national agreement to settle the difficult problems of our relations. Certainly, at a meeting of the commission chaired by M Bouffard, the friendly societies proposed signing agreements with the pharmacist in those communes or *départements* where mutualist pharmacies are established, but the mutuality has never failed to add that the subscriptions of members would be higher if they were to choose the free channel. Is that an honest proposal?

Are you not merely defending your profit to the detriment of the public interest?

I think that free pharmacy has proven the service that it brings to public health by the service that it carries out on behalf of the sick person. That the pharmacist should defend, for himself and his colleagues, his right to a decent existence does not seem to me reprehensible. Beside, is that not the case with all Frenchmen who are able to look after their own interests without harming those of the whole in doing so? But it is important to recognise that the opening of mutualist pharmacies will in the long, or not so long term, involve the disappearance of the free pharmacies, thus depriving the sick person of the permanence of the services we ensure.

Vestric VANTAGE

MANAGEMENT SYSTEMS FOR THE PROFESSIONAL RETAILER

The programme for retail pharmacists who wish to keep their businesses independent & profitable

During its first year the unique Vestric Vantage programme has attracted almost 2,000 active members, and the number continues to grow. Together, the elements of the programme detailed here form an inexpensive and easy-to-use package designed to help independent retailers achieve greater sales impact and tighter control of their businesses through the application of up-to-date management systems.

AUTOMATIC STOCK CONTROL

Designed to ensure that you have adequate stocks of the right products to meet your customers' requirements, without overstocking. The system produces figures which are regularly adjusted to keep pace with the changing customer demands on your business.

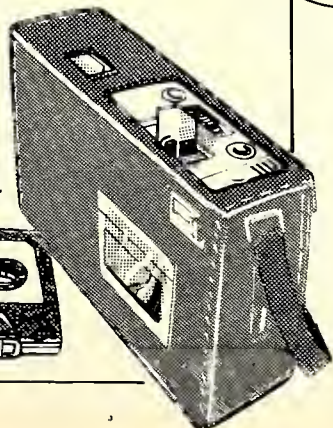


NEW TAPE ORDERING

Order placing is now made easier and more convenient for Vantage members through the introduction of this latest facility.

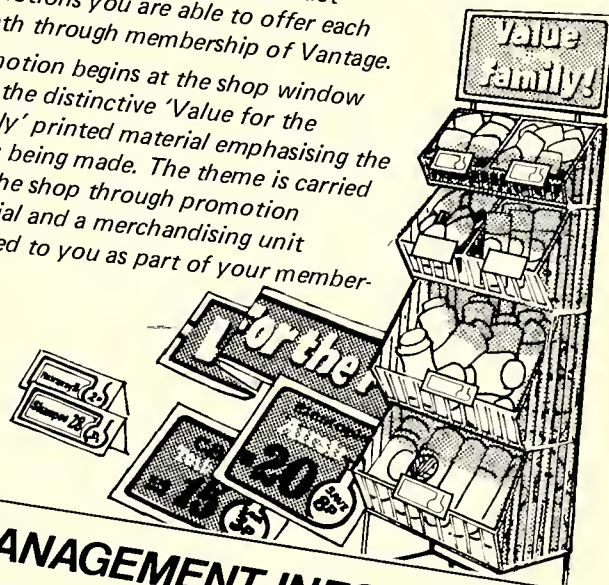
A portable dictating machine using a standard cassette tape is used to capture orders for NHS and OTC lines. The cassette is handed to your regular Vestric driver who takes it to your local branch where the order is processed and delivered to you in the normal way.

This new system is simple to use for you or your assistants, allows you to order at a time convenient to you, and is inexpensive compared with other equipment on the market fulfilling the same functions.



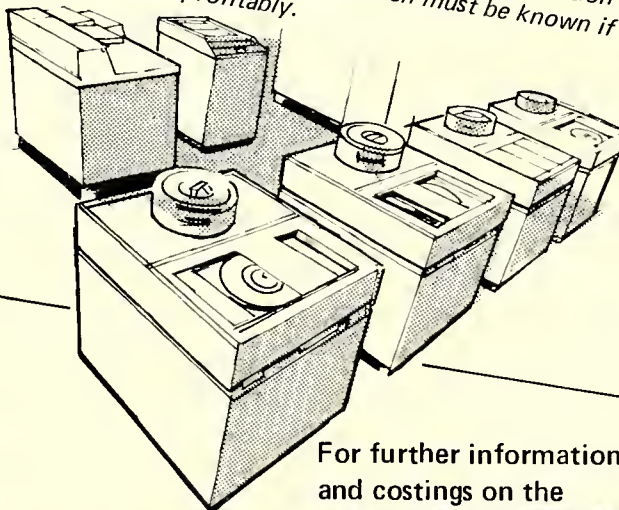
MERCHANDISING & DISPLAY

This aims to draw existing and new customers into your shop by highlighting the range of money-saving product promotions you are able to offer each month through membership of Vantage. Promotion begins at the shop window with the distinctive 'Value for the Family' printed material emphasising the offers being made. The theme is carried into the shop through promotion material and a merchandising unit supplied to you as part of your membership.



MANAGEMENT INFORMATION

In recent years, Vestric has made a considerable investment in its Computer facility. Vantage members benefit from that investment through the provision of meaningful and easily-understood management information produced by the Company's three ICL computers — information relating to the activities of individual businesses. The emphasis on all reports is on identifying areas of action within each business, and exposing information which must be known if the retailer is to operate profitably.



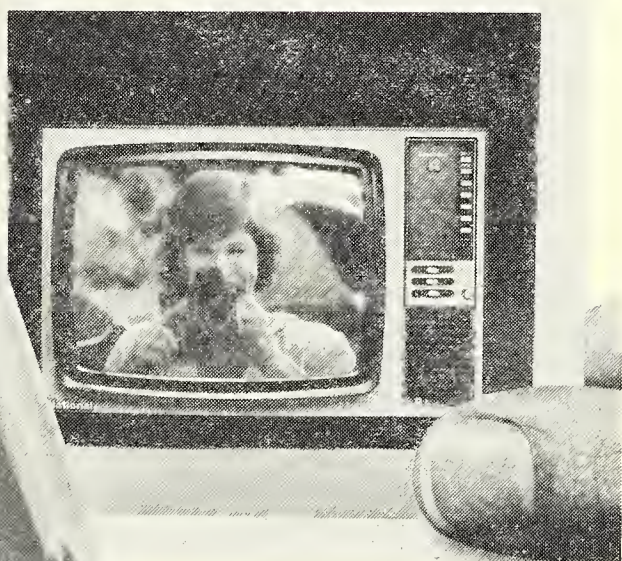
For further information and costings on the

Vestric VANTAGE

programme, contact Mr. C.D. Bell, Customer Services Manager, Vestric Limited, Chapel Street, Runcorn, Cheshire WA7 5AP.

WE'RE SPENDING TO GIVE POLAROID THE RIGHT

More money, for example, on television.



The campaign gets off to an early start with the first commercial going on air over Easter. It shows the Polaroid Swinger range, filmed in a shop like yours, and features a well-known television personality.

The star of our follow-up commercial is the Colour Swinger. Here we're repeating the sell that proved so successful last year.

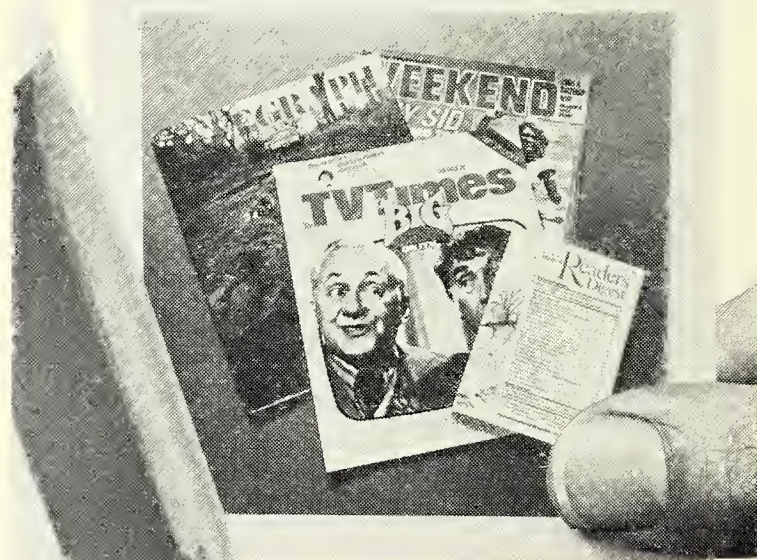
A demonstration of the product.

Polaroid instant picture cameras are seen in action in the home, on the

beach, with the family. Showing the fun and excitement of instant colour photography.

The commercials will run right into July delivering their message to some 16,000,000 homes.

We'll be focusing people's attention on Polaroid Colour Swingers in the press, too.



With colour pages and spreads in leading magazines like TV Times. Reader's Digest. Weekend. And The Daily Telegraph.

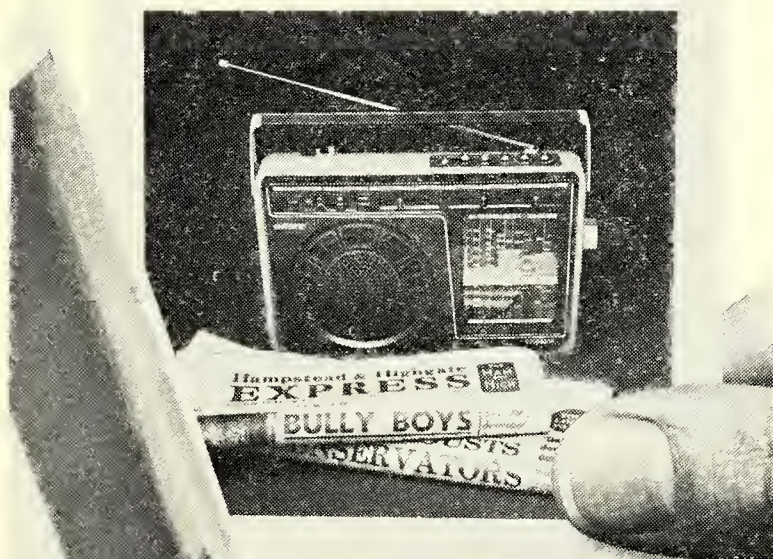
A four month campaign with a combined readership of over 15,000,000.

MORE THAN EVER COLOUR SWINGERS EXPOSURE.

That's how we intend to cover the whole of the country. Contact your Polaroid representative to hear how we

and window displays.

And, finally, how our point-of-sale offers you a choice of two colourful display packs, with supporting literature linked to our press and television advertising.



can involve you directly.

How, for example, we can help you advertise locally.

How we can supply you with advertisements for your local newspaper. And give you our advice on the most effective way to use local radio.

How our 'Summer Extra Merchandising Programme' will profit you considerably.

How our forthcoming promotion plans include a team of Polaroid girls to assist you with your in-store



You can hardly fail to profit from all this.

Providing, like us, you give our cameras the right exposure.

POLAROID

INSTANT PICTURE CAMERAS

Polaroid and Swinger are registered trademarks of Polaroid Corporation, Cambridge, Mass., U.S.A.
Polaroid (UK) Limited, Ashley Road, St Albans, Herts. Copyright Polaroid Corporation 1976. All rights reserved.

Follow the leader in oral hygiene.

Wisdom has always been the foundation of good oral hygiene.

A fact you Chemists know only too well.

It's also why over 63%* of all toothbrushes sold in Chemists are Wisdom.

Designing, developing and pioneering new toothbrushes with the country's leading dentists has made sure of that.

Toothbrushes like the Multi-tuft and the new Plaque Master.

What's more, Wisdom will be giving you more promotional support than all other brands put together.

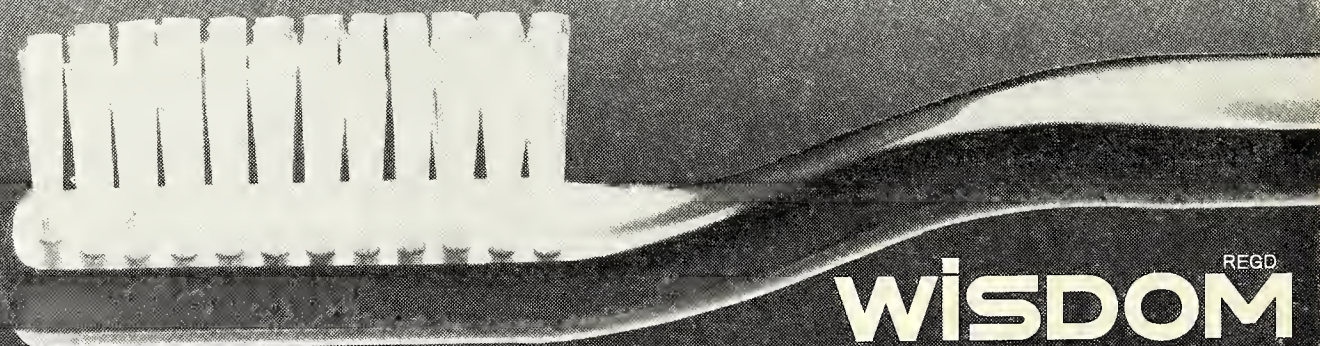
April 25th sees the start of our biggest-ever TV campaign. Three separate commercials will be enjoying heavy national coverage, with an extra burst in the Autumn.

There's posters and display material a-plenty, too.

So keep on following the leader... and keep increasing your profits.

Get your Wisdom representative to tell you more.

*Source RETAIL AUDITS LTD.



Students in call for own section of the Society

Members of the British Pharmaceutical Students Association have voted overwhelmingly to press the Pharmaceutical Society to form a student section which would have voting rights at the annual Branch Representatives Meeting.

The vote came during last week's BPSA conference held at Heriot Watt University, Edinburgh. Mr A. Banks, explained that BPSA had often approached the Society with a request to be acknowledged the sole voice for pharmacy students, but the Society had turned down the idea as not all students were members of BPSA. Following a motion at last year's BPSA conference at Chelsea (*C&D*, April 12, 1975, p495), a report had been produced about how a student section of the Society could be organised, and there had been several meetings with a representative of the Society who had suggested changes. Mr Banks presented the final report to the conference, adding that it was hoped to take it to the Society's Council in the near future; once a section was formed, he felt there would be no need for BPSA to continue. He stressed however that the section should be autonomous.

The report lists a number of points which would set the basis of the proposed student section. The section would have branch status as far as the BRM was concerned, but otherwise members would be eligible only to take part in the affairs of the section, which would be open to all undergraduate and postgraduate pharmacy students. The constitution of the BPSA would form the basis of the section and a National Advisory Committee set up including a member of Council, at least one member from each of the four areas of the Association, and the Society's secretary and registrar or his deputy to act as a "safety valve".

Call for more clinical pharmacy

Proposing a motion that the schools of pharmacy increase the extent to which clinical pharmacy and drug advice is taught prior to registration, Mr S. Wicks, Bath, said that pharmacists did not seem able to communicate much with doctors.

Mr S. Benrimoj, Bradford, argued that it had to be decided whether the subject should be taught at undergraduate or postgraduate level—if the former, it would be to the detriment of other subjects and if the latter, there would be fewer pre-registration places as employers would not like allowing students so much time off. He suggested that the Society should redesign the postgraduate year. Mr Ranshaw, president, announced that the Society had asked BPSA for its views on the relevance of the undergraduate course to the practice of pharmacy, and Mr J. Knott, a previous member of the Association's Executive, would be giving those views at

a meeting to be held in a few weeks' time. The motion was carried.

The conference also carried, by a large majority, a motion calling on the Society to try to reduce the intake of students into schools of pharmacy and to increase the number of preregistration places available—the latter by such means as pressing the Department of Health to subsidise general practice pharmacists taking graduates for their preregistration year. Proposing, Mr J. Blair, an executive member, said that hospital posts were being reduced because of NHS cutbacks and he could not see Boots doing more, so it was almost certain that there would be an excess of graduates this year. Seconding, Mr R. de Sousa, another executive member, said there was a misconception of what the preregistration year was about

—it was often thought of as practical training, whereas it was to consolidate previous training and needed to be supernumerary. He felt that the Society should define what the year should involve, and that the number of places should be looked at in relation to the student intake.

Mr Ranshaw said the problem had been discussed with the Society, which did not seem too concerned and which felt that all the students would be placed in the coming year. However, practising pharmacists did not agree, and one area pharmaceutical officer thought that some 200 students would be unplaced this year. Mr Banks said that the Association had been supporting that type of motion for a number of years and was beginning to convince others that there is a problem.

Other matters approved by the conference include:

☐ A subcommittee is to be set up to look into the allocation of preregistration posts in hospital pharmacy under the present national hospital appointments scheme; it had been pointed out during the conference that many students were dissatisfied with the scheme, and it appeared some hospitals were as well.

☐ The BPSA president is to write to the National Pharmaceutical Union to ask its members to support a voluntary ban on the sale of all sperm whale products.

Job satisfaction in retail stressed

The suggestion that job satisfaction is only found by hospital and academic pharmacists was criticised by Mr R. Worby, a member of the Pharmaceutical Services Negotiating Committee and National Pharmaceutical Union Executive.

Mr Worby suggested to the students that it was the broad application of the pharmacist's scientific training—such as in community pharmacy—which led to job satisfaction. The community pharmacist held a position of high trust and responsibility on his own—it was a heavy, worrying responsibility but one which led to job satisfaction if taken hold of properly.

The pharmacy could become the focal point of the community, he continued. Members of the public would come for advice to a professional person within easy reach—and apart from the policeman, the pharmacist was the nearest. Commercial activities also tended to make the atmosphere more "friendly" for the patient. However that "pastoral" role could not be learned "at the professor's knee", only at the "front line."

Movement of doctors to health centres—where they were "defended" by receptionists—was leaving a vacuum in the community which Mr Worby felt could be turned to pharmacy's advantage; however it was necessary to impress on the public the value of the pharmacist before it was too late. Handled in the right way, the future of general practice pharmacy he felt "has never been as bright as it is today."

During the discussion, Mr C. Ranshaw, BPSA president, queried how retail pharmacists could afford to take on pre-registration graduates. Mr Worby explained that in the last costs inquiry the Department of Health had identified a certain

amount of money for employing students—and that sum was all it was prepared to pay. The Department was prepared to extract that sum from the total pool and pay it with respect to students only, but the most that could make is about £800. In the case of a one-man pharmacy, the student would move from a liability to an asset during the year, but he would be an unwanted asset, so the employer would have little incentive unless he was reimbursed fully for the student's salary.

The PSNC had put it to the Department that the preregistration year was further education, Mr Worby continued, so the money should be forthcoming from another source such as the Department of Education. The Department had been asked to meet the Committee half way but they had declined. The only answer was more money, which would also go to the multiples who did not need it.

Mr D. Thompson, Heriot Watt, asked how pharmacies could be made more viable. Mr Worby said that the small pharmacies scheme—currently receiving "favourable consideration" in the Department—was designed to help support a pharmacy giving a necessary service to a population of 2,000. He disagreed with Mr Dunn who had suggested that the ideal population per pharmacy was about 10,000 (see p568), but he felt the average pharmacy, serving a population of 5,000-6,000, was "getting close to the viability limit". Mr Worby felt a pharmaceutical service could be provided to about 95 per cent of the population—whether paid for by the small pharmacies scheme or by more money from the Department—but he feared that if pharmacists did not provide the service, the Government would take over.

British Pharmaceutical Students Association conference

Five points for Government support of pharmacy

A five-point plan of how the Government should protect and encourage community pharmacy was put forward by Mr L. B. Dunn, chairman, Pharmaceutical General Council (Scotland).

Concluding his speech during the conference's forum session on the National Health Service, Mr Dunn listed the points as:

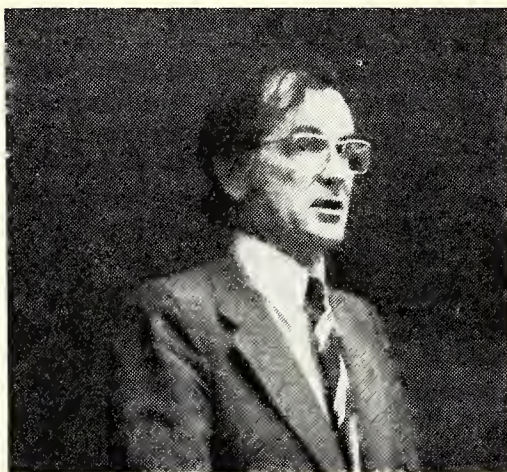
- There needs to be a drastic rethink of the size and location of health centres;
- Restriction of the NHS contract is necessary, which should lead to planned pharmaceutical services with emphasis placed on community needs;
- There should be a financial inducement towards group practice by pharmacists;
- A realistic return on capital employed is required;
- There should be direct reimbursement of certain expenses such as the cost of employing a postgraduate student.

Earlier Mr Dunn had described health centres as being "the major change in our time." However he queried their usefulness when they had set up as in Kirkcaldy, Fife—there one health centre had opened for a town of 50,000 people on one side of the town. "Why could not have four or five health centres been built, spread out around the town?" he asked, adding that it appeared that the public was the last to be consulted about a centre's location.

Health centre pharmacies

Turning to whether pharmacies should be in health centres, Mr Dunn again cited the case of Kirkcaldy, where money had to be provided for fitting out and stocking the pharmacy in the centre and for the salaries of the pharmacist and assistants working there. Yet no more prescriptions were being dispensed than previously, making each prescription more expensive and the other pharmacies less viable. If there were restrictions on new openings of pharmacies, pharmacists could decide whether they could afford to go into the centre or not—but there had to be protection from "leapfrogging." Mr Dunn predicted that it would be a long time before the Department of Health came round to the idea of contract restriction.

Ideally, pharmacies should serve a population of about 10,000 each, so there were too many at the moment Mr Dunn thought. He contrasted the situation of the years between the wars—when relatively little capital was required to open a pharmacy and many pharmacists did so because of otherwise poor job prospects—and the situation today—where substantial capital is required, and the profitability of smaller premises is being reduced because of competition from grocers and supermarkets. More and more pharmacies were being taken over by companies, and Mr Dunn saw that as removing community



Mr L. B. Dunn

pharmacists as many young graduates could not afford to open their own pharmacy.

Mr Dunn's Council had pressed the Department for a 26 per cent return on capital to help ease the inflationary situation—stock which cost £1,000 last year now cost £1,200—but the Department had turned that down. He added that when the Department was asked where they should get extra capital from to finance their business, they were told "it was no concern of the Department."

On the question of group practices, Mr Dunn felt that there should be incentives, similar to those given to doctors, to form "group pharmacies" to provide better services. However there would have to be restrictions on further openings "if five pharmacies combined to form two, someone else would open a third." Such group pharmacies could offer services to other parts of the country currently not being served—a group pharmacy in a county town might be allocated a rural area and be paid to look after it.

Mr Dunn asserted that the kind of pharmacist required in general practice was "one who wanted to talk to the public." That meant that training was necessary—but private pharmacists could not afford to employ graduates while undergoing such training. An answer could be direct reimbursement of the cost of employing a graduate.

Dr I. F. Jones and Dr T. G. Booth, pharmacy practice research unit, Bradford University, had earlier set the scene for the forum by explaining the situation before the 1974 NHS reorganisation and what that reorganisation was meant to achieve. Dr Jones contented that the need for proper management had been recognised since the inception of the service. He pointed out that when the National Health Insurance Act was being drafted in 1911 it was envisaged that prescriptions arising from that scheme—the forerunner of the

NHS—would be dispensed by the dispensaries of friendly societies. However, pharmacists—who in those days handled very few prescriptions—persuaded the government that the pharmacy was the place to have them dispensed.

Dr Jones also spoke of the "terrific burden" carried by the government for the hospital services—over half the budget was required just to keep them running. Pharmaceutical services cost about 10 per cent of the total budget, and politicians had often looked at that figure to see if cuts could be made there; it had become "a political hot potato."

On reorganisation itself, Dr Booth pointed out that both major political parties wanted a change in the structure of the NHS; about 900 organisations, committees and local authorities were connected with running the service and had to be consulted before any changes were made. The decision was to change to a process which would lead to more national decisions of how to allocate sparse resources; Sir Keith Joseph, when he was Secretary of State for Social Services, had looked for "a sound management structure." On community health councils Dr Booth predicted that much would be heard of them "as their teeth began to bite."

Dr P. Buchanan, assistant Scottish secretary, British Medical Association, gave the doctors' view of reorganisation. He said he was sorry to see the loss of the old executive council set-up; the professions had felt able to "get together" within the structure, which had not been replaced by family practitioner committees in Scotland as had happened in England and Wales. The current position had led to the "peculiar" situation where one committee—the area medical committee—could not deal with terms and conditions of service, but the same set of people—this time termed the local medical committee—could do so. Little result had yet been seen from "the multiplicity of boards and committees", commented Dr Buchanan, adding that there was the danger of "stagnation" of administration—if an administrator wanted to "lose" an embarrassing subject, a working party could be set up to report to a subcommittee, etc.

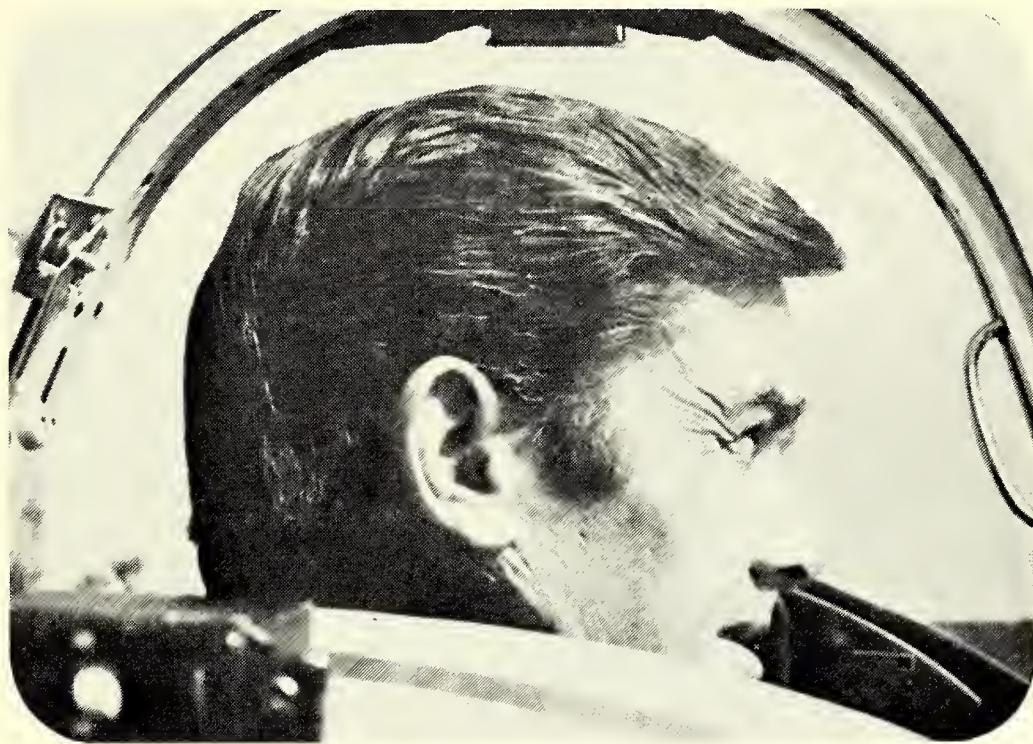
'Political' issues

Dr Buchanan also touched on "political" issues. He hoped that local health councils—the Scottish equivalent of community health councils—would not become "party political" which he thought could happen as 50 per cent of the members are local authority representatives; he held the same hope for local consultative committees. He also questioned the role of a trade union in professional matters: "Would you allow full-time trade union officials to take decisions on your behalf?" he asked, giving as an example striking on an instruction from such an official. "I doubt it very much".

One of the principles of the NHS—the freedom for a person to choose their own doctor—could be threatened, Dr Buchanan thought. He foresaw that it might be much more economic to attend the doctor nearest the patient's residence or place of work, and new restrictions on doctors coming into the area. He objected to the

Continued on p570

Heads we win!



*New 30-second
TV commercial
featuring British
Aerobatics
Champion
Neil Williams.*



*Current 30-second
TV commercial
featuring British
Rally Champion
Roger Clark.*

Roger Clark continues at full throttle on TV giving Cossack a head start.

Now with British Aerobatics champ, Neil Williams, on TV literally turning himself upside down to demonstrate Cossack's famous control, we'll be increasing our lead still further.

And as we're introducing a new winning formula for improved manageability (watch for the new pack), plus a greasy hair variant for the 50% of under 25s with greasy hair (watch for the white cap), you'd better make sure you're backing the winner too. Keep well stocked.



*All it controls
is your hair.*

BPSA conference

NHS reorganisation discussion

Continued from p568

term "primary care" to describe the team of health professionals, as that in his view meant "first aid"; he preferred the term "general practice team."

Concluding with a call for rationalisation of resources away from hospitals, Dr Buchanan argued that in these days of financial stringency, more resources would be required for patient care in the community. He felt that a general practitioner did not have time to give adequate care to the 3,500 patients on his list.

Mr J. A. Wandless, principal pharmacist, hospital section, Department of Health pharmaceutical division, explained that the NHS is one of the largest public enterprises, and that its growth in recent years had underlined the need for effective management—which had in turn led to the reorganisation of the service. The general aims of the reorganisation had been to improve co-ordination and planning; to enable greater contributions to the service from the professions; and to lead to uniform national standards, incorporating innovations and effective use of staff.

Co-operation called for

It was interesting to note, said Mr Wandless, how the NHS reorganisation and the post-Noel Hall report on reorganisation in the hospital service had joined together. "It is fair to say that the marriage is still being consummated." He felt there were areas where hospital, general practice, industrial and academic pharmacists should co-operate without delay; one such area was the manufacture of sterile products not currently available from the industry, as he felt they should not be made by hospitals. Mr Wandless concluded with a call for pharmacy to leave the "back seat"—it was "essential for the sake of the patient and the NHS."

During the discussion session—which followed a period when the students formed into groups for discussion of the topics raised—Mr R. Higson, chief pharmacist, Scottish Home and Health Department, joined the panel of speakers. Asked about health centres incorporating pharmacies, Mr Wandless cited the Craigavon and Ballymena health centres in Northern Ireland as being examples of well organised ones. Dr Booth said that the initiation of new centres starts at area level "and this is where the area pharmaceutical officer has a very important part to play"—the area chemist contractors committee needed to be contacted at that time. However he did not know whether the policy of consulting local pharmacists about services for the centre constituted a "restraint of trade"—he thought many younger pharmacists could be questioning how they could ever get a pharmacy near a health centre. Dr Buchanan felt community health councils would become more and

Members of the BPSA Executive for 1975-76 pictured at the dinner dance which closed the conference. Mr S. Benrimoj, the new president, is in the centre, front row



more important in the planning of such centres, while Mr Wandless thought that no one fixed plan would provide the solution for every area.

Mr Higson said that there were only three health centres in Scotland providing pharmaceutical services—one, at Sighthill, Edinburgh, formerly run by the Executive Council, was now run by the area health board, and the other two, at Kirkcaldy and Glasgow, were operated by consortia. He added that a committee—the National Pharmaceutical Advisory Committee—was being appointed in Scotland to look into the future of general practice pharmaceutical services; it would include representatives of a wide range of consumer interests.

Mr Dunn said that the situation had "improved tremendously" recently, but problems had arisen because of a misunderstanding some years ago—pharmacists did not want to run pharmacies inside the centres, but that had been misinterpreted as that they did not want to be consulted about planning such centres.

Health education

Mr R. de Sousa, for one of the student groups, asked about the pharmacist's role in health education. Mr Higson agreed that the pharmacist is the person to undertake such works but he could not say whether he should be paid for it. Dr Jones thought that if pharmacists did such work, in conjunction with NHS services, they would automatically be paid for it. Mr Dunn disagreed—his Committee had taken up the point with the Department which had stated that their sampling officer in a cost inquiry would specifically categorise such work as not NHS.

Another group asked about the place of unions in the health service—should there be an "NHS/TUC". Mr Dunn felt it would be interesting, but on the whole he was against it. The difference between a trade union and a professional negotiating body was that one would be prepared to take industrial action whereas the other would not—the service would have to go on. He would however like to see employee pharmacists as members of a trade union, with the union negotiating good salaries for them, imbursement to their employers by the Department.

Dr Jones questioned the point of belonging to a trade union if it were not the ultimate threat to withdraw labour. Dr Buchanan suggested it could be an organisation to bring together the health professions—at present there was no way they

could meet, but he felt some corporate body could bring them together both nationally and locally to discuss matters which could benefit the patient. He did not accept that trade unionism meant only strike action.

Dr Booth confessed to being "baffled" by the question. For years he had written about disunity in the profession which was composed of groupings often holding diametrically opposed views. "Disunity seems to be at the rootstock of many problems," he continued, and it seemed to him that any movement to reach unity in pharmacy should perhaps be encouraged. Dr Jones added that if the formation of a union was not successful in uniting the profession, it could produce yet further groupings.

Books

Tolley's Tax Tables 1976-77

Tolley Publishing Co Ltd, (44a High Street, Croydon, Surrey CR9 1UU). 9 × 9½ in. Pp 20 (limp cover). £0.90.

This edition, published within three days of the Chancellor's Budget speech, has 16 pages of tables covering all rates of income tax, corporation tax, capital gains tax and VAT likely to apply during the coming fiscal year. The table on the higher rates of income tax has been prepared on the assumption that the Government "achieves a satisfactory pay limit in the next stage of its incomes policy", and that the higher starting levels for rates up to 60 per cent will therefore apply. If no satisfactory limit is achieved the similar table in the 1975-76 edition will apply.

A four-page centre section contains a summary of the Budget proposals, plus information on capital transfer tax rates, National Insurance contributions, and taxable social security benefits.

Books received

Good Manufacturing Practices for Pharmaceuticals—a Plan for Total Quality Control

S. H. Willig, M. M. Tuckerman, W. S. Hitchings IV. *Marcel Dekker Inc*, (270 Madison Avenue, New York, NY 10016, USA). 9¼ in × 6 in. Pp 184. \$16.50.

Advances in Drug Research Volume 10

Edited by Alma B. Simmonds, *Academic Press*, (24 Oval Road, London NW1). 9¼ in × 6¼ in. Pp 164. £6.

Institute of Pharmacy Management International Conference

Management education of pharmacists

Professor J. M. Rowson, president of the Institute of Pharmacy Management International, retired from that office at the close of the Institute's twelfth annual conference held in Llandudno, April 9-12. The new president is Professor D. A. Norton, head of the school of pharmacy, University of Bath.

At the conference banquet on April 11 a set of hock glasses were presented to Professor Rowson on behalf of the council by the Institute's founder, Mr H. W. Tamski. During the twelve years Professor Rowson had been in office he never missed a conference at home or abroad, said Mr Tamski.

Among the guests at the banquet were the mayor of Aberconwy, Councillor K. F. W. Lee, who had opened the conference on Saturday. The mayor of Llandudno, Councillor Morgan H. Thomas, a pharmacist and member of the Institute, was also present accompanied by the mayoress.

Conference theme

Theme of the 1976 conference was "Management education of pharmacists in all their spheres of professional activity", and the first contribution was to have been given by Professor W. B. Swafford, assistant dean, college of pharmacy, University of Tennessee, USA. Two days before the conference was due to start the speaker suffered a family bereavement and was unable to attend or obtain a substitute at such short notice.

In place of the overseas speaker, who had intended giving a paper on a model syllabus and curriculum for pharmacy education at undergraduate level, Dr T. G. Booth and Ian F. Jones, conference chairman, presented a study carried out by them for the Pharmaceutical Society's education subcommittee last year. Their

study on pharmacy practice in the undergraduate degree programme had been published but no debate on their findings had so far taken place said Dr Booth before asking Dr Jones to present the paper. [This will be dealt with in a subsequent issue of *C&D*].

Hospital speakers

Speakers on management education in hospital pharmacy were Dr S. E. Fullerton, regional pharmaceutical officer Northwest Thames Regional Health Authority, and Dr P. R. Noyce, Kensington and Chelsea and Westminster Area Health Authority. Dr Fullerton said that now the pharmacist was recognised as a member of the health care team the concept of multi-disciplinary management teams became extremely important for hospital pharmacists. There were just under 2,500 pharmacists in the hospital service of whom about 1,800 had managerial duties. That might not be a big number compared with the numbers involved, say, in nursing, but nevertheless it did constitute a very significant sector of control in terms of responsibility for money, resources, patient safety, etc.

Because pharmacists possessed an academic background they were scientifically and factually orientated and this needed to be fully recognised when planning their development. The pre-registration year provided an opportunity for smoothing the change over from university life and its rather theoretical approach to the real life, or indeed death situations which were part and parcel of the hospital pharmacist's day-to-day environment. However, the pre-registration year was not really suitable, for a number of reasons, to "start" the pharmacist's training in management.

This situation, which really was an attitude of mind, could produce difficulties,

since such individuals (basic grade pharmacists) had a lot of independence in terms of professional knowledge and skill, and therefore found it hard to realise that they were only just ready to begin management training, in order to assist them to step onto the very bottom rung of the management ladder. It was an extremely important factor to appreciate and, although some schools of pharmacy did include some management training in the BPharm syllabus, a lack of time and the fact that the students had not been involved in live working situations made this contribution minimal. In other words, the pre-registration year should be a time for the practical application of professional knowledge and skills, and not a time for management development, he claimed.

The overall lack of success of the group chief pharmacist pattern in the past was, he believed, due to the groups being usually too small; the group chiefs' role being ill-defined; their responsibilities and authority not being clear; many of the pharmacists were unsuited and/or untrained for their new roles—and so a number of group chief pharmacists functioned on paper only. "Good pharmacists in the technical sense are not necessarily good managers of, for example, pharmacy departments."

'Consensus' approach

Multi-disciplinary management could take various forms and the type chosen for the NHS was consensus management—"certainly not the easiest one".

Consensus management might be defined as "an expression of a majority view with a supportive minority, who although opposed to the policy, accept and go along with the majority view, in order to get action." It was therefore very different from the traditional style of management, which was rather autocratic and operated on a direct majority vote style.

Managers must be prepared to accept the responsibility commensurate with their salaries, and make decisions which matched up to their responsibilities. With consensus management, however, each member of a team had the power of veto and this therefore indicated unanimous agreement or acceptance, without necessarily implying any particular degree of

Continued on p572

The mayor of Llandudno, pharmacist and member of the Institute, Councillor Morgan Thomas, with the mayoress, retiring president, Professor J. M. Rowson, and Mrs Rowson

Dr Ian Jones, the Institute's chairman, with Professor D. A. Norton, the new president, Mrs Jones, and the mayor of Aberconwy



Institute Conference

Management education

Continued from p571

enthusiasm. The fact that abstentions were not allowed prevented people saying afterwards, "I didn't support that policy proposal".

Concluding, Dr Fullerton said: "Management is not something that can be quickly learnt by a five-day crash course, similar to the sort of thing we might use to teach someone how to handle a new piece of scientific equipment. Many factors constitute the management education and training of hospital pharmacists and a great deal of money has been wasted over the years by a lack of proper long term management training plans. Consequently, this is what we are concentrating on as a priority. A lot of nonsense is spouted in terms of management jargon, when so much is simply common sense, but plans must ensure the correct balance between theory and practice."

Courses non-specific

Dr Noyce contrasted the current organisation of pharmacy within the Health Service with that existing five years ago. Then pharmacists were mainly engaged in professional/technical tasks in hospital pharmaceutical departments which were both self-contained, introspective, and with "an amorphous management structure".

The present highly-structured, well-defined situation of pharmacy within the NHS made the achievement of a real transition a difficult task. Only through a sincere commitment by pharmacists to a realistic management development programme would it become effective.

The current management training programmes had evolved largely to meet the management training needs of nurses. Like pharmacy, nursing had recently undergone a change in organisational structure as a result of a Government review body (the Salmon Committee).

Dr S. E. Fullerton



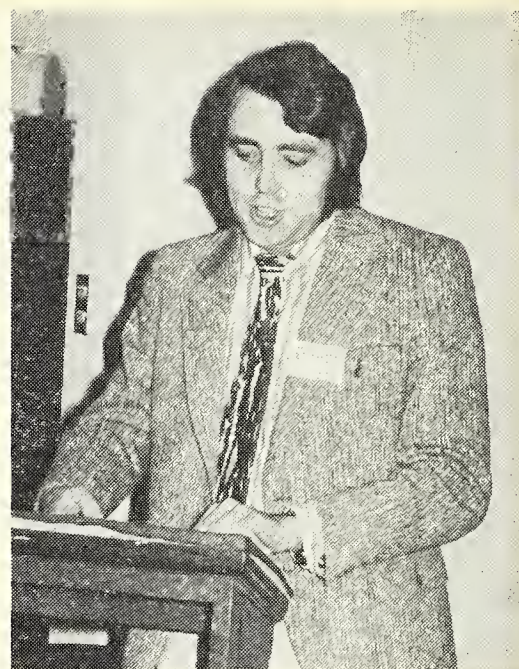
At the present time, pharmacists, usually when at staff or principal grade, were sent on multi-disciplinary middle-management courses, since generally this was the only organised training programme in which they could be accommodated. Selection of personnel was usually on an *ad hoc* basis, although some regions set targets on numbers and grades of pharmacy personnel who should attend. The major shortcomings were that although courses were designated multi-disciplinary, in reality they had strong nursing orientation, presenting problems of "transfer" for pharmacists; also the courses were seen as the complete management training programme, rather than part of an overall development process.

Dr Noyce contended that, in the main, senior Health Service pharmacists did not yet fully appreciate their new roles within the re-organised NHS structure. "One might ask why nursing is apparently so far ahead of pharmacy—simply size. In the NW Thames Region 13,000 qualified nurses and 160 pharmacists!"

Schools of pharmacy certainly contributed to administrative education but in respect of management training they could only provide an introduction to the principles. Within the NHS, training officers had been appointed at regional, area, and sometimes at district levels—if pharmacy made clear what its management training needs were, those officers could "be gainfully employed". So far there had been three education and training pharmacists engaged. The speaker was one of three. Within the NW Thames Region he was working at a "more rational approach to management training of pharmacists."

Annual meeting

Further details of the progress towards a sponsored education programme (see *C&D*, February 21, p270) were given by the director and secretary, Mr J. B.



Dr P. R. Noyce

Thompson. He said the cost of organising it would be £25,000 a year and it was hoped that finance would come from various sources including member companies of the ABPI, PAGB, DHSS and DITB. The course would embrace 20 subjects arranged in logical sequence.

As part of this research programme a panel of 300 pharmacies had been established to collect data on the quantity of products dispensed which will be statistically relevant to the national picture and thus generate further income.

Other points mentioned were:

- ☐ Members now in 30 countries.
- ☐ The formation of a Nigerian branch is well in hand and an Australian Institute should come into being this year.
- ☐ Fourteen out of 17 schools of pharmacy in UK now offer courses in pharmacy administration.

Letters

now getting, often for items which are not so unusual as those above but which take a little time in preparation—and the frequent patient's comment "I wouldn't have had any trouble if they had been tablets!"

One aged local doctor who still writes his scripts in the Imperial system, and some Latin, has them refused throughout North London; his handwriting is very legible but the reason given for inability to dispense them is often "can't decipher it."

Can we really complain of the lack of professional status, when the public's view of us is just "tablet counters?"

Multiple manager

Prescription 'difficulties'

The following four scripts were presented today and dispensed, after a suitable interval.

- ☐ Mist. creta cum catechu paed.
- ☐ Equal parts of salicylic acid ointment 1 per cent and glycerin of starch.
- ☐ A cream containing ichthammol, resorcinol, zinc cream and lanoline.
- ☐ 5 per cent argent. prot. mit and 1 per cent ephedrine in normal saline.

In each case the patient had tried up to six London pharmacies, without success. Granted that all of these are somewhat unusual, and some of the ingredients not readily available at some pharmacies, but the patients have been left with an unfavourable impression of the ability of our profession to deal with a script which is out of the ordinary. What is alarming is the number of "difficult" scripts we are

Amyl nitrite ampoules

In *C&D*, March 20, you published a letter complaining of inability to obtain amyl nitrite ampoules.

I would like to make it clear that the Department of Health and Social Security has in no way cut off the supply of amyl nitrite ampoules. This product is available from The Boots Company Ltd, Nottingham, Macarthy's Laboratories Ltd, Romford, and Evans Medical Ltd, Liverpool.

G. H. T. Deveney

Department of Health and
Social Security
London EC2

Westminster report

Health Bill allows for private dispensing

The Health Services Bill, published on Monday, which seeks to separate private practice from the National Health Service, allows pharmacists to dispense from health centres to private patients.

The Bill (HM Stationery Office, £0.50) states that any person wishing to use NHS accommodation or facilities to provide medical, dental, pharmaceutical, ophthalmic or chiropody services to non-resident private patients may apply in writing to the Secretary of State for permission, which would be granted so long as NHS patients were not put at a significant disadvantage. Persons providing Part IV services from NHS accommodation under arrangements in force at the time the Act is passed would be deemed to have been granted permission to continue, unless the Secretary of State directs otherwise for the above reason; the arrangements would end when the Act was passed. Any granting of permission would be on terms (including terms as to the payment of charges) decided by the Secretary of State.

Other proposals in the Bill are:

□ To reduce the present 4,444 NHS pay beds in England, Scotland and Wales by 1,000 within six months of the Bill becoming law. Phasing out of the remainder would be decided by an independent Health Services Board, composed of two members appointed after consultation with doctors and dentists, two members appointed after consultation with NHS trades unions and representatives of patients' interests, and a legal chairman. The Board would have Scottish and Welsh committees and would put forward proposals at six-month intervals for reducing the number of pay beds.

□ The Board would make recommendations within six months for common waiting lists for the NHS and private patients to ensure that patients are admitted to NHS hospitals on the basis of medical priority. It would consider representations made by doctors, dentists, health services staff and patients.

□ Proposals to build acute hospitals with 100 or more beds in greater London and 75 or more elsewhere would need authorisation from the Board before planning permission could be sought.

Rabies vaccination policy

The Earl of Mansfield asked in the House of Lords recently what measures were being taken to prevent an outbreak of rabies in the UK. Lord Strabolgi replied that so long as the country remained free of the disease there were no plans to permit vaccination except for dogs and cats in quarantine, which was compulsory. No known vaccine guaranteed immunity and to vaccinate in a rabies-free situation would be wasteful and could lead to a

false sense of security. However, in the event of an outbreak, compulsory vaccination could be ordered in the area.

The only animal anti-rabies vaccine authorised for use in the UK was manufactured in France, he continued. To stockpile it would be costly—it had a limited shelf life—but emergency measures could include immediate temporary licensing of additional suitable vaccine and stepping up of production of the French vaccine. On vaccine for human use, he said the supply of rabies antiserum, vaccine and immunoglobulin was being increased in the UK.

New Government moves on metrication

Fresh efforts are being made by the Government to secure a new understanding with trade organisations and Conservative leaders in Parliament on the completion of the metrication programme.

This was revealed by Mr Alan Williams, Minister of State for Prices and Consumer Affairs, in the Commons on Monday when MPs probed the implications of the Government's decision to postpone the second reading of the Weights and Measures Etc Bill—a decision taken because of fears that the Government would be defeated through a number of Labour backbenchers joining with Conservative MPs against the second reading.

Replying to a question from Mr Giles Shaw, MP, Mr Williams explained that a previous Conservative Government entered into international commitments to metricate and to allow the import of metric goods after a set date. "To avoid confusion and unnecessary cost for consumers as a result of these commitments it is necessary to complete the metrication programme in an orderly fashion. These possible problems could become more acute as increasing numbers of school-leavers, trained primarily in the metric system, have to contend with the protracted use of a dual system in our shops and factories."

Mr Shaw then asked when the Government would re-table the Bill. Mr Williams said: "It seems to me . . . that we should at least try, on what has been a consensus policy for the last ten years, to explore how far consensus can be re-established. That means consensus with the consumer organisations, which have been overwhelmingly in support of changing Section 10(10) of the Weights and Measures Act 1963, and with the trade. I have had meetings and have invited the Opposition to meet me also."

Later, he revealed that, since March 23, he had received representations from 21 organisations—14 representing industry and seven representing consumers. The "overwhelming majority" of such representations received both before and after March 23, supported the view that the orderly completion of the metrication programme was essential and that there should be no avoidable delay in the Bill's progress.

Mr Robert McCrindle questioned whether it would be practical to extend the powers of the Metrication Board or the Office of Fair Trading so that some consideration could be given to the interests of the consumer—who was anxious

about profiteering and confusion—while not delaying the metrication of industry.

Mr Williams replied that he was considering the possibility of using the Price Commission on a special reference to deal with pricing over the period of metrication. In addition, he had asked the Retail Consortium to consider whether it could act as a first-stage vetting operation on the goods which flowed from manufacturers at the time of metrication.

Further review of product licence fees soon

A further review of Medicines Act product licence fees is due very shortly, Dr David Owen, Minister for Health, announced in the Commons last week.

Almost another financial year had passed in which income from fees had fallen well short of the total expenditure. The shortfall in 1975-76 would need to be considered when carrying out the next review and the new regulations would need to be in operation by September 1. Consultations with the industry would begin in a few weeks.

Earlier Mrs Lynda Chalker had "prayed" to annul the Medicines (Fees) Regulations 1976, which increased the licence fees by large amounts (*C&D*, February 28, p888). She complained that the Government delayed over accounting procedures—there were no new regulations in 1974 or upratings in 1975, resulting in major increases in 1976. There had then been a rush to put the Regulations into effect—they were made on March 4, laid before the House on March 5, and became operative on March 6, which was a breach of the 21-day convention between the laying and coming into operation of a Statutory Instrument. Mrs Chalker was also concerned that proprietary medicines would go up in price as a result of the fee increases, making people turn to the general practitioner when they did not need his help. Another worry was that the UK was becoming the most expensive country in the world to develop and market drugs: "There is a grave danger of this investment going elsewhere."

Dr Owen apologised that the order was laid at such short notice, saying the Government would try hard to keep to the normal 21 days in future, although he added that the Regulations came as no surprise to the industry. To phase the increase by waiving fees for another year would cost about £2m, which was inappropriate at present.

Dr Owen went on to assure the industry that the Government had no plans to use the technique of turnover relation as a ready means of escalating income from fees. "The fees under the Act are to defray the cost of operating the Act and not to provide a general source of revenue."

He admitted that the initial fees of £1,800 for certain product licences was very large but applied only to new chemical entities and was insignificant compared with costs of the trials required for such products. However, he agreed to review the figure if it turned out to be a deterrent to UK development for multinational companies. Mrs Chalker later withdrew the motion.

RIDDOBRON...

for asthma —
the effective **INHALANT**
used with confidence by
asthma sufferers over many
years

RIDDELL PRODUCTS offer a
complete range of **ASTHMA**
PRODUCTS and **INHALERS**.

Remember **RIDDELL** for the
treatment of asthma and
bronchitis

RIDDELL PRODUCTS LTD.

RIDDELL HOUSE,
10-14 DUNBRIDGE STREET,
LONDON E2.
Telephone: 01-739 7254/5/6.

"Eesiness"

SURGICAL ELASTIC HOSIERY

- TWO-WAY STRETCH ELASTIC YARN
- NYLON LIGHTWEIGHT STOCKINGS
- NYFINE LIGHTWEIGHT TIGHTS
- SEAMLESS ONE-WAY STRETCH
- NYLON NET

Stock Sizes or Made to Measure

Also obtainable direct or through your wholesaler. Write for literature.

Abdominal Belts - Spinal Supports - Elastic Band Trusses - Jock Straps
Suspensory Bandages - Athletic Slips - Stockinette Bandages

E. SALLIS LTD. Vernon Works, Basford, Nottingham
Phone: 77841-2 Grams: Eesiness

NEWBALL & MASON LTD.

Established in 1850

SPICES AND CULINARY HERBS IN EVERY VARIETY
FLAVOURING ESSENCES AND FOOD COLOURS

The Famous

EXTRACT OF HERBS, LEMONINE, GINGER,
SARSAPARILLA, DANDELION & BURDOCK

For Herb Beers

Attractively packed with pharmacy in mind, and also
available in bulk.

Detailed price list and bonus terms from
Dormston Trading Estate, Burton Road, Dudley,
West Midlands, DY1 2BR. Tel. No. Sedgley 2537

PROFIT from the new government anti- smoking campaign



As a result of the government's new
campaign, many people will want
to give up smoking.

NICOBREVIN makes it easier for
them. It does not affect the sense of
taste and really helps to break the habit.

By keeping constant stocks and displaying well
(showcards and display packs available) you'll
make sure that your customers — and your
profits — are a lot healthier.

NICOBREVIN gives retailers the **BIGGEST**
PROFIT MARGIN OF ANY ANTI-SMOKING AID

Ask your wholesaler for a supply now!

NICOBREVIN

ANTI-SMOKING CAPSULES

MILLER 13 GOLDEN SQUARE LONDON W1 Sole
distributors in the UK — urgent enquiries 'phone 01 734 4246/9

Mr EXPORT DATA

OFFERS YOU

comprehensive information on the complex
business of exporting to every world market.
including countries, cities, languages, currencies,
banks, embassies, commercial representatives,
airports, seaports, airline cargo booking offices,
container and unit load services, documentation
and licensing details, import regulations,
financing exports, trade marks, weights, measures,
abbreviations, voltages, postal charges,
money orders, cables, telephones, climate,
holidays, EEC PREFERENCE regulations, ATA,
BOTB, CAN, ECGB, THE, VAT information, plus
monthly up-dating service,

700 pages 210 × 143 mm £14.00

Benn Brothers Limited 125 High Street Colliers Wood
London SW19 2JN Tel: 01-542 8575

Company News

Vestric sales top £50m in first half

Sales by Vestric Ltd were up by over 25 per cent in the six months to December 31, 1975, compared with the same period of 1974.

According to figures released this week, wholesaling sales were some £50.1m in the first half of the current financial year, compared to £39.1m previously—an advance of £11m. Sales to Vestric by other parts of the Glaxo group also show a rise of £1.4m to £7.3m.

Pretax profits of the parent company Glaxo Holdings Ltd rose by almost £7m, to £26.7m, in the same period, with the improvement being ascribed to price increases, favourable exchange rates and continued cost control. Group sales to external customers, both home and abroad, increased by 20 per cent and exports, at £43m, were 22 per cent up. The directors state that the results confirm the continuing growth in demand for the group's products and on improvement in profit margins. Interim dividend 3.15p net.

Kingswood plan to buy more pharmacies

Kingswood (Chemists) Ltd are planning to buy more pharmacies this year, according to the 1976 annual report of Kingswood's parent company, Booker McConnell Ltd, which was published this week. The report notes that 14 more pharmacies had been acquired recently, bringing the total to 69 on April 1, 1976, and it adds: "With further acquisitions in 1976 and the move to a new warehouse in the south-east, prospects are good." Production began in January at the division's resited Rusco manufacturing premises at Biggleswade, Bedfordshire.

USDAW 'closed shop' for Boots warehouse workers

The Union of Shop, Distributive and Allied Workers has negotiated a "closed shop" agreement with Boots, whereby all new production and warehouse workers—and most of the workers already so employed—will have to be members of the union as a condition of employment from May 1. The plants and depots affected by the agreement are Nottingham and Beeston, Airdrie, Aldershot and Heywood, but it does not apply to laboratory staff. The union is also currently engaged in recruiting Boots retail staff.

Mavala and Payot move closer

Two members of the ITT multi-national group—Mavala, the Swiss-based hand and nail care company and Payot of Paris, the international skin care and beauty house

Allen & Hanburys' annual dinner for "veteran" employees last week was attended by 280 past and present "veterans" with 25 years or more service. The toast of "The company" was proposed by Mr J. R. Eastcott, MPS, sales manager, who reminded his audience that the minimum length of service of the 480 A & H veterans is now 12,000

years! Pictured here are the "40 years service" personnel, with guests. Left to right (back row) Mr E. Campkin, Mrs E. Sully (guest), Mr R. D. Smart, Mr E. Clarke, (front row) Mr M. J. Smith, Mrs E. Halsey, Miss L. Seymour and Mrs Clarke



More pharmaceuticals for export than NHS

The National Health Service is no longer the pharmaceutical industry's largest customer, according to a new "facts and figures" booklet from the Association of the British Pharmaceutical Industry. It slipped behind exports for the first time in 1974—sales to the NHS amounting to £287m (34 per cent of total output) against £302m in exports.

Research and development by the industry is now estimated at £70m and can account for up to 12 per cent of company turnover, says the booklet—"The Pharmaceutical Industry and the Nation's Health". Pharmaceutical prices in 1974 were 27 per cent higher than in 1970 but, by contrast, the prices of all manufactured products rose by an average of 52 per cent over the same period.

—have moved closer together in London. Mavala's warehouse and despatch facilities have transferred to Ashford, Kent, where Payot already have similar accommodation and staff. Mr E. C. Harrison, managing director, and staff are now at Mavala's New Bond Street hand and nail care clinic and school. Orders should be directed to 139a New Bond Street; Payot of Paris are in the same building.

To cope with a big expansion programme for both companies in 1976, Mavala's expanded sales force is taking over selling of Payot products to chemists.

Appointments

Evans Medical Ltd and Evans Biological Ltd: Mr R. Begley has joined the boards as financial director.

Monopolies and Mergers Commission: Sir Max Brown is to succeed Sir Alexander Johnston as deputy chairman on May 1. Sir Max, who has been a member of the Commission since January 1975, retired as Permanent Secretary to the Department of Trade in 1974.

Colson & Kay Ltd: Mr R. Blows has been appointed national sales manager and, following further expansion of the sales

As a proportion of all NHS expenditure, the pharmaceutical services have fallen considerably since 1966 from 11.3 per cent to 9 per cent in 1974. On prescription costs the booklet states that in 1975 the average cost of a prescription was 130p, including dispensing fees—if this prevented hospitalisation, it would have resulted in a saving of £150, the cost of caring for one patient during an average stay in hospital in that year. Hospital expenditure on pharmaceuticals at £58m in 1974 was about 2 per cent of total hospital expenditure, about the same as in 1950.

The daily cost of NHS medicines per head of population in 1974 was 1.6p, compared with 11p per day on smoking, 19p on alcohol and 22p on clothing.

force, Mr S. Deak has been appointed sales executive for Middlesex, north London and home counties. Mr W. Wearing has been appointed sales executive for South London and home counties.

Wilkinson Sword Ltd: Mr Alex Simpson has been appointed national accounts manager responsible for chemists, departmental stores, hairdressing and similar outlets. Mr Simpson, who joins Wilkinson Sword after 10 years at Bristol-Myers, will report to national sales manager, Mr Keith Watson.

Gillette Industries Ltd: Mr Bernard Rohner, formerly public relations manager for 3M Company in France, has become the new European director, corporate public relations for Gillette Co. He takes over from Mr Alistair Sedgwick who, after 30 years, is leaving Gillette to set up his own international public relations agency, Williams Sedgwick International Ltd.

ICI agricultural division: Mr G. H. Pace, currently director of ICI's protein project, has been appointed industrial chemicals and purchasing director. He succeeds Mr G. J. Connolly who has left ICI after 30 years' service to become the director for the north of the National Enterprise Board. The new protein director is Mr P. P. King who is also research and planning director of the agricultural division.

Market News

Vitamins up 7½ per cent

London, April 14: 15 imported vitamins—the home-produced exceptions being aneurine and calcium pantothenate—were advanced 7½ per cent by a major supplier this week as a result of changes in the exchange rate between the £ and the Swiss Franc. Exact prices on the new scale were still being calculated as C&D went to press.

Among the spices and seeds, cloves, Jamaican ginger, mace, celery, peppers and turmeric were all advanced. Brazilian menthol also moved upwards. Chillies were unquoted. Other crude drugs showing marked changes included Peru balsam, hydrastis—with lemon peel up £30 a metric ton in the spot position.

Petitgrain was an essential oil again available on the spot, with the shipment price quoted at the same level. Chinese spearmint was quoted for May-June shipment.

Pharmaceutical chemicals

Acetic acid: 4-ton lots, per metric ton delivered—BPC glacial £227; 99.5 per cent £216; 80 per cent grade pure £201, technical £187.

Acetone: £232 per metric ton.

Alcin: 50-kg lots £12.90 kg.

Aluminium chloride: Pure 50-kg lots, £0.8248 kg.

Amylobarbitone: Less than 100-kg lots £7.66 kg; sodium £8.91.

Bismuth salts: £ per kg.

	under 50-kg	50-kg	250-kg
carbonate	9.18	8.95	8.90
salicylate	7.66	7.45	—
subgallate	8.13	7.90	—
subnitrate	8.33	8.10	8.05

Borax: EP grades, 2-4 ton lots per metric ton in paper bags, delivered—granular £159; crystals £217; powder £175; extra fine powder £184.

Boric acid: EP grades per metric ton in 2-4 ton lots for British material—granular £210; crystals £290; powder £230; extra fine powder £240. Imported material plus £45.00.

Bromides: Crystals £ per metric ton

	Under 50-kg	50-kg	1,000-kg
Ammonium	1.040	885	830
Potassium*	960	810	775
Sodium	940	796	761

* Powder plus £40 kg

Butabarbital: 50-kg lots £9.99 kg; sodium £10.98.

Butobarbitone: Less than 100 kg £9.48.

Calamine: BP £557 per 1,000 kg.

Cantharadin: 100-g lots £0.75 per g.

Carbon tetrachloride: Technical in 4-ton lots £185.60 metric ton.

Chloral hydrate: 50-kg lots £1.00 kg.

Chloroform: BP from £337.50 metric ton in 280-kg drums to £405 in 35-kg drums. 2-litre bottles £1.61 each; anaesthetic £0.66 per 500 ml bottle.

Choline: (500-kg lots) bitartrate £1.99 kg, dihydrogen citrate £1.50.

Citric acid: BP granular hydrous per metric ton. Single deliveries £581. Anhydrous £624. Five-ton contracts £593 and £638 respectively.

Clioquinol: USP XII, 500-kg lots, £11.06 kg.

Cocaine: Alkaloid £396 kg; hydrochloride £361. Subject to Misuse of Drugs Regulations.

Cyclobarbitone: Calcium £9.53 kg in 25-kg lots.

Dextromethorphan: £110 per kg in 5-kg lots.

Ether: Anaesthetic, BP 2-litre bottles £21.4 each; drums from £1.11 kg in 16-kg drums to £1.01 kg in 130-kg. Solvent, BP from £796 metric ton in 16-kg drums to £712 in 130-kg.

Formic acid: per metric ton delivered in 4-ton lots, 98 per cent £236.25; 85 per cent £251.25 to £209.

Glucose: (Per metric ton in 10 ton lots) monohydrate £178; anhydrous £410; liquid 43° Baumé £170 (5-drum lots); naked £144 (tanker 14 tons).

Glycerin: 1-5 ton lots £514 metric ton; 5-ton £511 ton, in 250-kg returnable drums.

Hydrogen peroxide: 35 per cent £200 metric ton.

Hydroquinone: £2.08 per kg for 250-kg lots.

Hypophosphites: £ per kg

	12½-kg	50-kg
Calcium	3.07	2.94
Iron	5.72	5.58
Magnesium	4.87	4.48
Manganese	6.12	5.72
Potassium	4.20	4.06
Sodium	3.48	3.14

Hypophosphorous acid: (50-kg lots) Pure 50 per cent £2.8865 kg; BPC 30 per cent £2.2434.

Kaolin: BP natural £109.90 per 1,000 kg; light £114.90 ex-works in minimum 6-ton lots.

Magnesium carbonate: BP per 1,000 kg; heavy £454. Light 338.

Magnesium dihydrogen phosphate: Pure £1.5725 kg in 50-kg lots.

Magnesium hydroxide: (metric ton) BPC light £950; 28 per cent paste £360.

Magnesium oxide: BP per 1,000 kg heavy £1,304; light £950.

Magnesium sulphate: (ex-works, per metric ton) BP from £78.00 metric ton; commercial £64.00; exsiccated £196.40.

Magnesium trisilicate: £528 metric ton.

Methadone hydrochloride: Subject to Misuse of Drugs Regulations, £1.33 per 5-g.

Metal: Photo grade per kg, 50-kg lots £5.64; 250-kg £5.46.

Mercurials: Per kg in 50-kg lots; ammoniated £5.70; oxides—red £6.75 and yellow £6.50; perchloride £4.70; subchloride £6.00; iodide £6.20 in 25-kg lots.

Mersalyl: Acid £20.25 per kg.

Narcotine: £25-kg lots alkaloid and hydrochloride £18.20 kg. Subject to Misuse of Drugs Regulations.

Opates: (£ per kg) in 1-kg lots; subject to Misuse of Drugs Regulations—Codeine alkaloid £240.40-£359.60 as to maker; hydrochloride £208.90; phosphate £183.40-£274. Diamorphine alkaloid £282.90; hydrochloride £258.60. Ethylmorphine hydrochloride £234.40-£349.60. Morphine alkaloid £264.70-£395; hydrochloride and sulphate £216.10-£323.

Paraffins: Liquid BP heavy £1.528 gal; light BPC £1.376 for 1-5 drum lots; technical white oils WA23 £1.269, WA21 £1.217. Petroleum jelly BP soft white £250.20; yellow BP from £190 to £240 as to grade and source.

Pentobarbitone: Less than 100-kg £12.39 kg; sodium £13.40.

Pethidine hydrochloride: 10-kg lots £23.88 kg. Subject to Misuse of Drugs Regulations.

Phenobarbitone: In 50-kg lots £9.19 kg; sodium £10.05.

Pholcodine: 1-kg £240.90-£378 as to maker. Subject to Misuse of Drugs Regulations.

Phosphoric acid: BP sg 1.750, £0.4373 kg in 10-drum lots.

Quinalbarbitone: Base and sodium in 25-kg lots £11.74 kg.

Saccharin: BP in 250 kg lots £3.40 kg; sodium £3.10.

Sorbitol: Powder £398.50 metric ton; syrup £200.

Tartaric acid: About £705 per metric ton.

Theophylline: Hydrate and anhydrous £3.41 kg in 100-kg lots. Theophylline ethylenediamine £3.36 kg under 50-kg lots.

Crude drugs

Balsams: (kg) Canada £13.30 spot; £13.00, cif for shipment. **Copaiba:** BPC £1.55 spot; £1.50, cif. **Peru:** £4.05 spot; £3.70, cif. **Tolu:** £3.15 spot.

Chillies: Mombassa unquoted.

Cinnamon: (cif) Seychelles bark £345 ton. Ceylon quills 4 O's £0.53 lb.

Cloves: Madagascar £2,950 per ton, cif; £3,050 spot.

Ginger: (ton, cif) Cochin £615; Jamaican spot £950. Nigerian split £385, peeled £500. Sierra Leone £650.

Hydrastis: (kg) £7.90 spot; £7.70, cif.

Lemon peel: Unextracted £1,020 metric ton spot; £990, cif.

Mace: Grenada No 1 £2,100 ton, fob.

Menthol: (kg) Brazilian £8.80 spot; £8.70, cif. Chinese spot duty paid £9.75; shipment £9.25, cif.

Nutmeg: (per ton, cif) East Indian 80's £1,300; bwp £975. West Indian 80's £1,280, unassorted £1,275; defective £995.

Pepper: (ton) Sarawak Black £940 spot; £850, cif; white £1,100; shipment £1,040.

Seeds: (metric ton, cif) Anise: China star forward £450. Caraway: Dutch £365. Celery: Indian £385. Coriander: Moroccan £240. Cumin: Indian £660; Turkish £500. Dill: Indian £180. Fennel: Indian £440; Egyptian £235. Fenugreek: £125.

Turmeric: Madras finger £240 ton, cif.

Essential and expressed oils

Anise: (kg) £16.50 spot; £15.25, cif.

Bois de rose: (kg) £4.50 spot.

Patchouli: £6.00 kg spot; £5.50, cif.

Peppermint: (kg) Arvensis—Brazilian £3.70 spot; £3.45, cif. Chinese £3.55 spot; £3.55, cif. American piperita £16.00 (Far West origin).

Petitgrain: Spot and shipment £4.85 kg.

Sanda'wood: Mysore £45.00 spot; £38.00, cif.

to quality.

Spearmint: American Far West £8.50 kg. Chinese £8.20 May-June shipment.

The prices given are those obtained by importers or manufacturers for bulk quantities and do not include value added tax. They represent the last quoted or accepted prices as we go to press.

Post Scripts

The taste test

"Children love the flavour" claimed the bottle of Cupal children's cough mixture—but the child of a "That's Life" viewer "couldn't stand" it. So the BBC1 programme's research team went into action at a London nursery, selecting a suitably unrepresentative sample of ten potential lovers of the flavour for a panel test. The results, published with due lack of solemnity on last weekend's show, were to the effect that 50 per cent loved it, 30 per cent quite liked it, 10 per cent didn't know—and ten per cent never even got a chance to try it! We're not sure what the flavour technologist would make of the panel's preference for the plastic spoon...

Mr David Ferguson, chief perfumer with Bush Boake Allen Ltd, retired last month after 35 years of being the man behind the development of many evocative perfumes—including the major Johnson & Johnson toiletries such as Johnson's baby powder. Johnson & Johnson gave a special luncheon for Mr Ferguson, and Mr Harry Wale (left), manager, baby products division, presented him with a retirement gift



Coming events

Tuesday, April 20

Lanarkshire Branch, Pharmaceutical Society, Nurses' recreation hall, Strathclyde Hospital, at 8 pm. Annual meeting.

Wednesday, April 21

Crawley, Horsham and Reigate Branch, Pharmaceutical Society, Crawley Hospital, at 8 pm. Annual meeting and cheese and wine evening.

Thursday, April 22

Bristol Branch, Pharmaceutical Society, Dyrham Lodge, 16 Clifton Park, Bristol, at 8 pm. Annual meeting.

Leeds Branch, National Pharmaceutical Union, Golden Lion Hotel, Lower Briggate, Leeds, at 8 pm. Annual meeting. Mr M. Major (medical gases representative, British Oxygen Co) on the BOC service and oxygen supply problems.

Advance information

Pharmaceutical Society of Great Britain. Professor A. H. Beckett, department of pharmacy, Chelsea College, on "Bioavailability—implications for hospital and general practice pharmacists", 17 Bloomsbury Square, London WC1, April 28, 7 pm.

A. NELSON AND COMPANY LIMITED, 73 DUKE STREET, LONDON, W1M 6BY

Telephones 01-629 3118 3119 3205

Specialists in Homoeopathic Pharmacy

Automatic telephone answering service available when
the Pharmacy is closed

ENTEROSAN

NEW
FORMULA

RELIEVES STOMACH UPSETS, COLIC
& DIARRHOEA. CONVENIENT TABLETS
CONTAINING KAOLIN AND MORPHINE IN A 16 TABLET
TRAVEL PACK OR A 48 TABLET FAMILY PACK.

Distributed by:

A. J. BOX & DRIVERS LTD., 32 POWERSCROFT ROAD,
FOOTSCRAY, SIDCUP, KENT. Telephone 01-300 3377

MAIL ORDER PROTECTION SCHEME

Members of the Periodical Publishers Association have given to the Director General of Fair Trading an undertaking to refund monies sent by readers in response to mail order advertisements (except for classified advertisements) placed by mail order traders who fail to supply goods or refund the monies owing to liquidation or bankruptcy. This arrangement does not apply to any failure to supply goods advertised in a catalogue or in a direct mail solicitation. Publishers in membership of the Periodical Publishers Association are making these refunds voluntarily and readers' claims can only be entertained in cases where the mail order advertiser is the subject of liquidation or bankruptcy, where proof of payment can be established and if lodged within three months of the date on which the advertisement appeared. Any claims received after the three month period will be considered at the discretion of the publisher. For the purpose of this scheme, mail order advertising is defined as: 'Direct response advertisement, display or postal bargains where cash had to be sent in advance of goods being delivered'. Classified and catalogue mail order advertising are excluded.

The only BEVELLED TONGUE DEPRESSOR in the world.

APPLICATORS ALSO AVAILABLE

AYRES BIOPSY CERVICAL SCRAPERS

This high quality scraper immediately available
in large quantities. Special prices for bulk
orders.

ASHWOOD TIMBER & PLASTICS LTD.,

Plyfa House, Leven Road, London E14 0LW Tel: 01-987 6343/6461

Classified Advertisements

Post to Classified Advertisements, Chemist & Drug-
gist, 25 New Street Square, London EC4A 3JA.
Telephone 01-353 3212.

Publication date Every Saturday.

Headings All advertisements appear under appro-
priate headings.

Screen 100.

Display/Semi Display £5.00 per single column
centimetre, min 25mm. Column width 42mm.

Whole page £350 (254mm × 178mm).

Half page £200 (125mm × 178mm).

Quarter page £110 (125mm × 86mm).

Lineage £1.00 per line, minimum 5 lines @ £5.00.

Box numbers £0.50 extra.

Series Discounts 5% on 3 insertions or over. 10%
on 7 insertions or over. 15% on 13 insertions or over.

Copy date 4 pm Tuesday prior to publication date.
Advertisements should be prepaid.

Circulation ABC January/December 1975: 14,722

Shopfitting

SELF SELECTION will increase your
toiletty sales sufficiently to pay for
a complete shop modernisation. As
primary manufacturers of wall fittings
and counters we offer very early
delivery and installation in just one
day, or overnight, new shops or old
shops or part shops. Immediate
quotations without obligation for
shopfronts and interiors. Thirsk
Shopfittings, 741-743 Garratt Lane,
London SW17 0PD. Telephone 01-
946 2291 (4 lines).

INTERPLAN SYSTEM 80 modular
shopfittings, attractive units at
attractive prices, complete instal-
lations. NPU recommended. Brochure
from OLNEY BROS. LTD, SHOP-
FITTING, NORTHBRIDGE ROAD,
BERKHAMSTED, HERTS. Tel: 5417-9.

CASH REGISTERS rebuilt as new
fully guaranteed from £75. Itemisers
£185. Call and see our range. Open
Monday to Friday. THIRSK SHOP-
FITTINGS, 743 Garratt Lane, SW17
0PD. Tel: 01-946 2291.

SPAN SHOPFITTERS GO NATIONAL!

Well known London manufacturers
of interior shopfittings now offer—
1. Nationwide service. 2. A guar-
antee that no other quality fittings
can be cheaper. 3. Low deposit or
interest free H.P. terms in approved
cases. 4. Good discounts for cash
and special discounts for new shop
installations. We still require shops
in some areas to act as showrooms,
in which case our "Showshop"
scheme will benefit you. Telephone:
01-653 5859 or write to Span Shop-
fitting Co., 32 Church Road, London
SE19 2ET for immediate action.

WANTED URGENTLY Old mahogany
chemist shop fittings. We remove and
pay cash. John Derham Ltd., 248
Camden High Street, London, N.W.1.
Tel: 01-485 6611.

DISPENSARIES FIXTURES AND
FITTINGS. Complete service by spe-
cialists. Phone Allan Campbell, A.C.
Shopfitters, 34B Jeffery Street, Gilling-
ham, Kent. Medway (0634) 55508.

Wanted

A. & H. OTTER LTD.

(established 1920)

Largest cash stock buyers in the
trade for manufacturers' clearing
lines, rejects, also retailers'
stocks.

8 Northburgh Street, London
EC1V 0BA. Tel: 01-253 1184/5.
Telegrams: "Salvalli", London,
E.C.1.

WE WILL PURCHASE for cash a
complete stock of a redundant line,
including finished or partly finished
goods, packaging, raw materials,
etc. No quantity too large. Our rep-
resentative will call anywhere. Write
or telephone Lawrence Edwards &
Co. Ltd., 6/7 Wellington Close,
Ledbury Road, London W11. Tel:
Park 3137-8.

URGENTLY REQUIRED, all items
connected with old-fashioned Phar-
macies—runs of drug drawers, shop
rounds, jars, etc. Complete interiors
of pharmacies bought. Telephone
Ashted (Surrey) 72319 or Ashted
76626, or write Robin Wheeler, 7
Gladstone Road, Ashted, Surrey.

Agents

BaByliss Electric Styling Irons. Com-
pany marketing nationally advertised
range of Electric Styling Irons seek
agents having established connec-
tions with Chemists and Depart-
mental Stores. For further information
write: Mr. D. Mosley, Standring Son
& Co. (Hull) Ltd., 101 Spring Bank,
Hull HU3 1BJ. Tel: 0482 27311.

Please mention
C & D when replying
to advertisements

Classified Advertisements

Appointments

Vestric

REQUIRES A

BUYER

at its Footscray branch. The successful applicant, age 25-40, will be sales orientated and be able to control and develop staff at a senior level, and have had at least 2 years' experience in a similar position. Preference will be given to applicants with previous experience in pharmaceutical wholesaling or retailing.

Duties will include the maintenance of adequate stocks of the range of products carried by the branch, with particular responsibility for forecasting forward demand.

Vestric, a member of the Glaxo Group of Companies, is the largest pharmaceutical wholesaler in the United Kingdom, serving independent retail pharmacists, veterinary surgeons, hospitals and photographic suppliers.

In addition to an excellent salary, the Company also offers a number of attractive fringe benefits such as an annual profit sharing bonus and pension scheme.

Initially please write to: Mr H. Heath, Branch Manager, Vestric Limited, Cray Road, Footscray, Kent, DA14 5BZ.

A worthwhile job with Vestric

Are you interested in your profession ?

Every aspect of it, we mean—the science, the selling, the ethics, the business management, the politics, the products . . . In short, do you enjoy being a pharmacist? If so

Could you write about it ?

Following internal promotions, *Chemist & Druggist* has a vacancy for an additional pharmacist to join the editorial team. The qualities required are post-registration experience of pharmacy practice, plus an ability to write clearly and to the point. Full training will be provided for the successful applicant to acquire the necessary journalistic skills.

Have you an inquiring mind ?

Then you will want to know more. *C&D* offices are in Central London and a five-day week is operated—but we can't promise you will have your feet up every weekend! But why not find out what a career with *C&D* offers by sending details of your qualifications and experience, to

A. Wright, FPS, DBA,
Editor, *Chemist & Druggist*,
25 New Street Square,
London EC4A 3JA.

**Chemist
& Druggist**

Miscellaneous

TIGHTS

by

HONEYMOON OF LONDON

For a full selection of tights and pop-sock that "sell-on-sight"; for a regular merchandising service; for a variety of display units and stands; contact STILETTO SALES, 3 BATSON STREET, LONDON W12 and ask for our salesgirl to call.

FASHION JEWELLERY Jodez (Manchester) Ltd

34 Shudehill, Manchester M4 1EY

Tel: 061-832 6564

Largest and most exclusive range of direct and imported Continental Jewellery, Necklets, Pendants, Dress Rings, Earrings, Brooches, Bracelets, Hair Ornaments. Suppliers to Chemists over 20 years.

Sample parcels available.

StarGems
OF
LEICESTER

FASHION JEWELLERY

Elegantly displayed. Super fast sales. Big profits. VAT at 8%.

Contact:

STAR GEMS OF LEICESTER

160 Melton Road, Leicester

Tel: (0533) 667800

Personal Callers Most Welcome

Tolley's

Tax Tables 1975/76

20 pages of easy-to-read tables covering the new rates of income tax, corporation tax, estate duty, capital gains tax and ACT, for 75p.

On sale now at leading booksellers or direct from us.

Tolley Publishing Co.,
44a High Street, Croydon
CP9 1UU. 01-686 9144.

ORDER NOW

CHEMIST & DRUGGIST DIRECTORY 1976

Over three hundred and fifty pages of vital information for all engaged in the pharmaceutical, cosmetic and allied industries.

Lists over 1,800 manufacturers
Some 9,000 product and brand names
Tablet & Capsule Identification Guide
National Health Service Medicines Acts
Value Added Tax
Retail and Wholesale Outlets

These are just some of the edition. Send for your copy edition. Send for your copy sections included in the 1976 today:

Chemist & Druggist,
25 New Street Square,
London, EC4A 3JA. 01-353 3212.

Price £12 inc. postage and handling. C&D subscribers only £8 inc. postage and handling.

Business opportunities

We have a product of major potential with U.K. licence and existing turnover. We wish to appoint company with detailing force as exclusive agent for the United Kingdom. Box Number 2400.

Please address Box No. replies to: Box No. ...

Chemist & Druggist
25 New Street Square
London EC4A 3JA



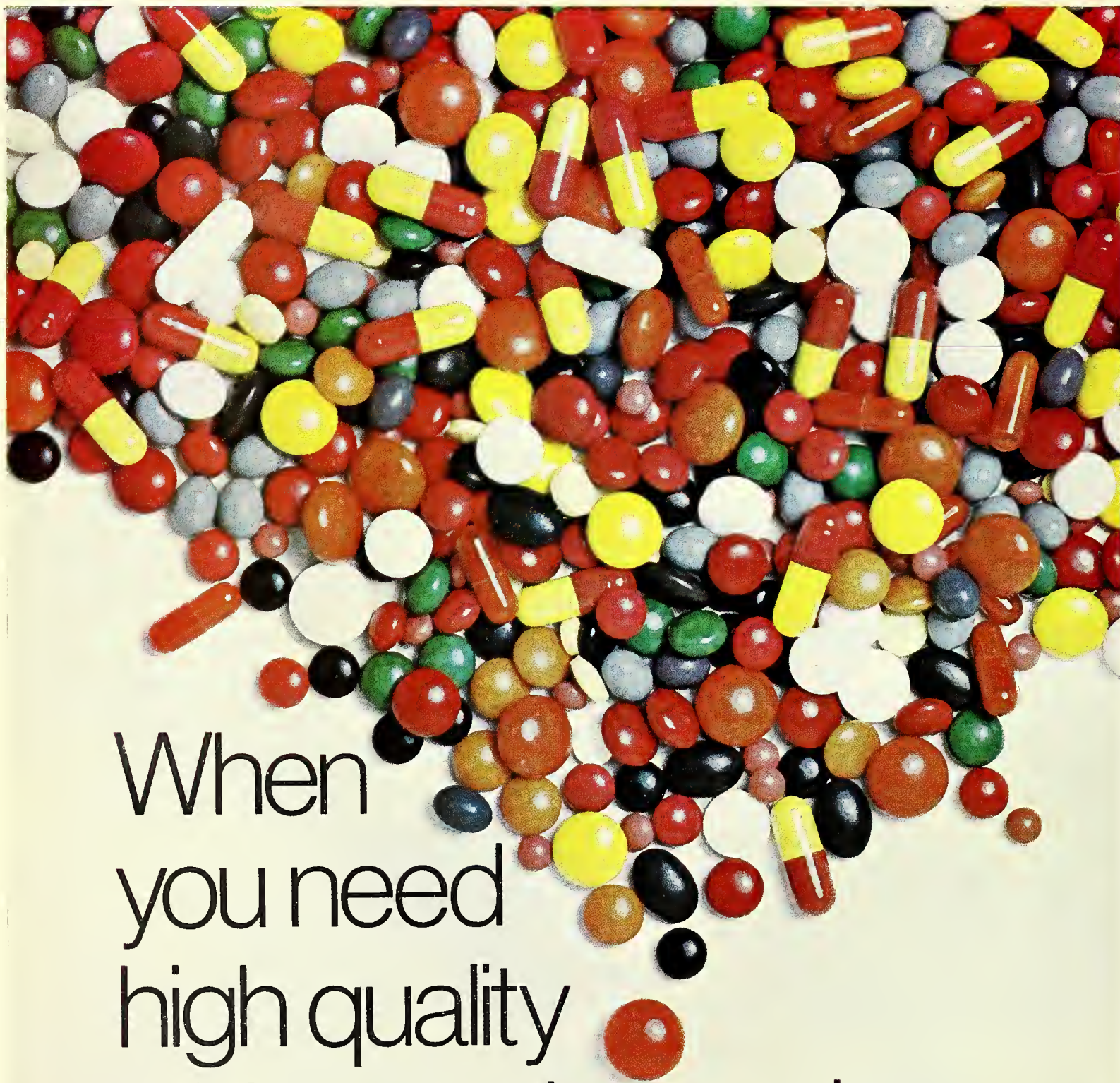
Display them and they'll sell!

We know, we've proved it. So please display them.

IT'S THE LAST 2 WEEKS OF THE 10 INVOICED AS 9 BONUS

APS

® Order Pollenaps (and Display Material) direct from
Approved Prescription Services Ltd. FREEPOST, CLECKHEATON,
West Yorkshire BD19 3BR or from your usual wholesaler.



When
you need
high quality
tablets and capsules...

we're in business

 **seward** pharmaceutical

Seward Pharmaceutical, Imberhorne Lane, East Grinstead, Sussex, England RH19 1QX
A member of the Medical Division of UAC International

Telephone our Sales Department on East Grinstead (0342) 21436/9